11/19/2009 16:30

Image# 29993366262

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) 2350 KERNER BLVD., SUITE 250 ADDRESS (number and street) Check if different than previously SAN RAFAEL CA 94901 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00384362 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 10 0 1 2009 10 3 1 2009 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Jason D. Kaune Type or Print Name of Treasurer Electronically Filed by Jason D. Kaune 11 19 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2/335

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)

D D 0 1 10 2009 10 31 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date Cash on Hand (a) 2009° 445690.14 January 1 (b) Cash on Hand at 690542.06 Begining of Reporting Period ..... 77433.16 643531.25 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 767975.22 1089221.39 6(a) and 6(c) for Column B) ..... 75121.00 396367.17 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 692854.22 692854.22 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 1597.60 Schedule C and/or Schedule D) ..... X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FE6AN026

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 335

Write or Type Committee Name

MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	68436.36	549652.94
	(ii) Unitemized	8968.40	92676.65
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	77404.76	642329.59
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	77404.76	642329.59
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	1000.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	28.40	201.66
18.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	77433.16	643531.25
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	77433.16	643531.25

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 335

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:  (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	1101.00	4717.17
Expenditures(c) Total Operating Expenditures	1121.00	4/1/.1/
(add 21(a)(i), (a)(ii) and (b))	1121.00	4717.17
2. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	54500.00	236500.00
4. Independent Expenditure		
(use Schedule E)	0.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To:     (a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contribution Refunds	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	19500.00	155150.00
9. Other Disbursements	19300.00	133130.00
D. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
· ·	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	75121.00	396367.17
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	75101.00	200207.47
from Line 31)	75121.00	396367.17

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 335

120 F0	,	1	
	Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	utions (other than loans) (d), page 3)	77404.76	642329.59
	ution Refunds 3(d))	0.00	0.00
	tions (other than loans) e 34 from Line 33)	77404.76	642329.59
	Operating Expenditures (a)(i) and Line 21(b))	1121.00	4717.17
•	perating Expenditures 5, page 3)	0.00	0.00
	g Expenditures e 37 from Line 36)	1121.00	4717.17

FE6AN026

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) FRANK HARVEY  Mailing Address 304 HEARTHSTONE F	ROAD		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City WILLIAMSBURG FEC ID number of contributing	State VA	Zip Code 23185	Transaction ID: INC.A.68960  Amount of Each Receipt this Period  1300.00
	Receipt For:  Primary  Other (specify) ▼  Primary  General	Occupation CHIEF M	on MARKETING OFFICER e Year-to-Date ▼ 1300.00	
В.	Full Name (Last, First, Middle Initial) GERARDO ORTIZ Mailing Address 14 TROY DRIVE, #B			Date of Receipt  1 0 0 2 2 0 0 9
	City	State	Zip Code	Transaction ID: INC.A.68961
	SPRINGFIELD  FEC ID number of contributing federal political committee.	NJ C	07081	Amount of Each Receipt this Period 650.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	DIRECT	OR, PHARMACY AUDIT e Year-to-Date ▼ 650.00	
C.	Full Name (Last, First, Middle Initial) DENISE WEISS Mailing Address 1590 SOUTHWEST PR	ROSPERIT	Y WAY	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
	City	State	Zip Code	Transaction ID: INC.A.68962
	PALM CITY  FEC ID number of contributing federal political committee.	C	34990	Amount of Each Receipt this Period 650.00
	Name of Employer LIBERTY MEDICAL		RESIDENT, QUALITY & TRA	INING
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)			2600.00
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 7/335   (check only one)
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS I	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial)  ROBIN C. WENTWORTH			Date of Receipt
Mailing Address 309 WATERVIEV	V DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.68959
FRANKLIN LAKES  FEC ID number of contributing federal political committee.	NJ C	07417	Amount of Each Receipt this Period 5000.00
Name of Employer NONE	Occupation HOMEMA		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial)  MS CHRISTINE BIZARRO	I		Date of Receipt
Mailing Address 26 DAYLILY DRI	VE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MOUNT LAUREL	State NJ	Zip Code 08054	Transaction ID: INC.A.70843  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0000-1	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 660.00	
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX			Date of Receipt
Mailing Address 6527 SHORBUR	GH DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City INDIANAPOLIS	State IN	Zip Code	Transaction ID: INC.A.70327
FEC ID number of contributing federal political committee.	C	46278	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n RM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (option	nal)		5040.00
TOTAL This Period (last page this line nu	ımber only)	······································	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) MR BARRY CESANEK Mailing Address 5 LEXINGTON CT  City SHAMONG FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State NJ C Occupation DIR PHA	Zip Code 08088	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
– B.	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VISTA	0 0	550.00	Date of Receipt  10 03 2009
	City  VERADALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State WA C Occupation VP/GM		Transaction ID: INC.A.70537  Amount of Each Receipt this Period  25.00
_	Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate	e Year-to-Date ▼ 1100.00	Deta of Resoirt
C.	MR KENNETH DANIELS  Mailing Address 4156 DUNMORE DRIV  City  LAKE WALES  FEC ID number of contributing federal political committee.	State FL	Zip Code 33859	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupation VP/GM Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			62.50

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	i. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO			Date of Receipt
	Mailing Address 9 GREEN HILL TRAIL			10 03 2009
	City TROPHY CLUB	State TX	Zip Code 76262	Transaction ID: INC.A.70626  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATI	n ONAL SERVICE CENTER	7
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 2200.00	
ь. В.	Full Name (Last, First, Middle Initial) MR ROBERT GIBBS	\		Date of Receipt
	Mailing Address 544 DENMOOR COUF	{		10 03 2009
	City GALLOWAY	State OH	Zip Code	Transaction ID: INC.A.70386
	FEC ID number of contributing federal political committee.	C	43119	Amount of Each Receipt this Period  12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n ARM PRACTICE	7
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- С.	Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
О.	Mailing Address 12224 MONTCALM ST	REET		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City CARMEL	State IN	Zip Code	Transaction ID: INC.A.70691
	FEC ID number of contributing federal political committee.	C	46032	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			87.50
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 335 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any per the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR BRICE LOVE  Mailing Address 2390 BRANDON RI  City	D State Zip Code	Date of Receipt  10 03 2009  Transaction ID: INC.A.70542
COLUMBUS  FEC ID number of contributing federal political committee.	OH 43221	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation DIR PHARM PRACTICE  Aggregate Year-to-Date   550.00	
Full Name (Last, First, Middle Initial) MR ROSS LUCE Mailing Address 1066 WEST GROV	E CT	Date of Receipt  10 03 2009
City	State Zip Code	Transaction ID: INC.A.70451
GIBSONIA  FEC ID number of contributing federal political committee.	PA 15044	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1320.00	
Full Name (Last, First, Middle Initial) MRS CATHY PATTEN		Date of Receipt
Mailing Address 2001 MEADOWS A	VENUE	10 03 7 2009
City	State Zip Code	Transaction ID: INC.A.70607
LANTANA  FEC ID number of contributing federal political committee.	TX 76226	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS			Date of Receipt
	Mailing Address 2780 FOLKSTONE RC	DAD		10 03 7 9 9
	City COLUMBUS	State OH	Zip Code 43220	Transaction ID: INC.A.70408  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40220	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 1100.00	
В.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
	Mailing Address 800 SANDY TRAIL			10 03 2009
	City	State	Zip Code	Transaction ID: INC.A.70789
	KELLER FEC ID number of contributing	TX	76248	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n	7
	Receipt For:		e Year-to-Date 🔻	-
	Primary General Other (specify) ▼		1100.00	
C.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III			Date of Receipt
	Mailing Address 266 BRUSHY CREEK	AVE		10 03 7 9 9
	City	State NV	Zip Code	Transaction ID: INC.A.70587
	LAS VEGAS  FEC ID number of contributing federal political committee.	C	89148	Amount of Each Receipt this Period  60.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	
	Other (specify)		2640.00	
	SUBTOTAL of Receipts This Page (optional)			110.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 335 (check only one)    X
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persongle name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE  Mailing Address 6108 HUNTER LANE  City COLLEYVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	`	Date of Receipt  M M M D D D 2 2 0 0 9  Transaction ID: INC.A.70618  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT Mailing Address 8362 GOLDEN PRAIL City TAMPA FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	RIE DRIVE  State Zip Code FL 33647  C  Occupation VP/GM  Aggregate Year-to-Date  2200.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MRS JENNIFER UTTERDYKE Mailing Address 1881 GREENTREE F  City LEBANON FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code OH 45036  C  Occupation DIR PHARM PRACTICE Aggregate Year-to-Date  600.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		125.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3X)  Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 335 (check only one)    X
NAME OF COMMITTEE (In Full)	norts and Statements may not be sold or used by any person using the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initia MR CALVIN WASDYKE  Mailing Address 5 APPLE OR	,	Date of Receipt
City MOORESTOWN	State Zip Code NJ 08057	Transaction ID: INC.A.70602  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	50.00
Receipt For: Primary General Other (specify)	VP/GM Aggregate Year-to-Date ▼  2200.00	
Full Name (Last, First, Middle Initia MR JAMES ZIRPOLI Mailing Address 6691 DEERV	Date of Receipt  10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: INC.A.70513
LOVELAND FEC ID number of contributing federal political committee.	OH 45140	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initia DIANA LUM	J)	Date of Receipt
Mailing Address 64-34 213TH	ST.	10 05 7 9 2009
City	State Zip Code NY 11364	Transaction ID: INC.A.69602
BAYSIDE  FEC ID number of contributing federal political committee.	NY 11364	Amount of Each Receipt this Period 650.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIRECTOR, PROPOSALS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUPTOTAL of Possists This Poss /	optional)	725.00

SCHEDULE A (FEC FOITEMIZED RECEIPTS	rm 3X)  Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other the NAME OF COMMITTEE (In Full		son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Ini	DNS INC. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Mailing Address 8 CEDAR A	VENUE	Date of Receipt  1 0 0 6 7 2 0 0 9
City <u>ALLENHURST</u>	State Zip Code NJ 07711-1034	Transaction ID: INC.A.69594  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	5000.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP PRESIDENT	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Ini JANEL GRIFFIN	,	Date of Receipt
Mailing Address 8 CEDAR A	VENUE	10 06 2009
City	State Zip Code	Transaction ID: INC.A.69595
ALLENHURST  FEC ID number of contributing federal political committee.	NJ 07711	Amount of Each Receipt this Period 5000.00
Name of Employer NONE	Occupation HOMEMAKER	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Ini JONATHAN STARR Mailing Address 373 NORTH	iial) IWEST DEWBURRY TERRACE	Date of Receipt  1 0 0 6 2 0 0 9
City	State Zip Code	Transaction ID: INC.A.69596
JENSEN BEACH FEC ID number of contributing federal political committee.	FL 34957	Amount of Each Receipt this Period  1300.00
Name of Employer LIBERTY MEDICAL	Occupation CHIEF FINANCIAL OFFICER	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page	(optional)	11300.00
TOTAL This Period (last page this	line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	C. POLITICAL ACTION COMMIT	
. CHRISTOPHER RYAN  Mailing Address 2809 AMELIA DRIV	E, #303	Date of Receipt  1 0 0 8 2 0 0 9
City PALM BEACH GARDENS	State Zip Code FL 33410	Transaction ID: INC.A.69605 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	650.00
Name of Employer LIBERTY MEDICAL  Receipt For:	Occupation  VP, FINANCIAL EVALUA  Aggregate Year-to-Date ▼	TIONS & ANALYSIS
Primary General Other (specify) ▼		650.00
Full Name (Last, First, Middle Initial) MR THOMAS ABSON Mailing Address 57 SYCAMORE DE		Date of Receipt
	10 10 2009	
City WALDWICK	State Zip Code NJ 07463	Transaction ID: INC.A.70461
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FORMULARY & COV	ERAGE MGMT
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	550.00
Full Name (Last, First, Middle Initial) MS LESLIE ACHTER	1	Date of Receipt
Mailing Address 821 ALBEMARLE S	STREET	10 10 2009
City	State Zip Code	Transaction ID: INC.A.70450
WYCKOFF	NJ 07481	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR ANALYTICAL S	SVCS
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	100.00
SUBTOTAL of Receipts This Page (optional	)	725.00
TOTAL This Period (last page this line num	per only)	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	3A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 16/335   (check only one)
Any information copied from such Reports or for commercial purposes, other than us	s and Statements may sing the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	INC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MR EDWARD ADAMCIK			Date of Receipt
Mailing Address 1021 SUNSET F	RIDGE		10 10 2009
City <u>BRIDGEWATER</u>	State NJ	Zip Code 08807	Transaction ID: INC.A.70359  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHAF	n RM CONTRACT & CONSUL	TING
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) DIANE ADAMS			Date of Receipt
Mailing Address 34 THOMAS ST			10 10 2009
City CALDWELL	State NJ	Zip Code 07006	Transaction ID: INC.A.70832  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n BUSINESS REQUIREMENT	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR STEPHEN ADLER			Date of Receipt
Mailing Address 139 BELLVALE	LAKES RD		10 10 2009
City WARWICK	State NY	Zip Code 10990	Transaction ID: INC.A.70447  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10330	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	n TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	<u> </u>	Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (opti	onal)		125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 335 (check only one)    X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DR JODY ALLEN Mailing Address 3031 MOUNT HILL E  City MIDLOTHIAN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code VA 23113  C  Occupation VP CLINICAL POLICY-GOV AFFAIR Aggregate Year-to-Date  1100.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MARENE ALLISON Mailing Address 4405 WISMER ROAL  City DOYLESTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO Mailing Address 19 ROSS ROAD  City SCARSDALE  FEC ID number of contributing federal political committee.	State Zip Code NY 10583  C	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	VP INFO TECHNOLOGY  Aggregate Year-to-Date ▼  1100.00	150.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	<b>A</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 18/335   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	<u>-</u>		
Full Name (Last, First, Middle Initial) TEJWANSH ANAND			Date of Receipt
Mailing Address 10 WHIPPOORW	M M / D D / Y Y Y Y Y Y 1 1 0 1 0 2 0 0 9		
City CHAPPAQUA	State NY	Zip Code 10514	Transaction ID: INC.A.70785  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	n TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MS JAYME ANTONOPLOS			Date of Receipt
Mailing Address 48 WITTE ROAD			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City HEWITT	State NJ	Zip Code 07421	Transaction ID: INC.A.70621
FEC ID number of contributing federal political committee.	C	07421	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR EXE		
Receipt For:  Primary General  Other (specify) ▼	<del></del>	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR DAVID ARCISZEWSKI			Date of Receipt
Mailing Address 20 CHADWELL P	LACE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.70550  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07300	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CO		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (option	l l		100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>A</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 19 / 335   (check only one)     X   11a
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) DENNIS AUCH			Date of Receipt
Mailing Address 1981 E. COVEY V	IEW COURT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SALT LAKE CITY	State UT	Zip Code 84106	Transaction ID: INC.A.70927  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MS CHARLOTTE BABCOCK	I		Date of Receipt
Mailing Address 2636 SHAKER RD	)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CLEVELAND HEIGHTS	State OH	Zip Code 44118	Transaction ID: INC.A.70901
FEC ID number of contributing federal political committee.	C	44110	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CCT EXEC	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) ERIK BAGIN			Date of Receipt
Mailing Address 73 HIGHLAND AV	ENUE		M M / D D / Y Y Y Y Y 1 1 0 1 0 0 0 0 0 0 0 0 0 0 0
City GLEN RIDGE	State NJ	Zip Code 07028	Transaction ID: INC.A.70831  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07020	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	n AL MGR GROUP	
Receipt For:  Primary General Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (option	<u> </u>		125.00

SCHEDULE A (FEC FO	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
NAME OF COMMITTEE (In Fu	Reports and Statements may not be sold or used by any penan using the name and address of any political committee    ONS INC. POLITICAL ACTION COMMITTEE (a.k.)	
Full Name (Last, First, Middle Ir MS BECKIE BARATKO  Mailing Address 80 N. WOO  City  ENGLEWOOD	itial)	Date of Receipt    1 0
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROPOSAL UNIT	50.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Ir MR THOMAS BARATTA Mailing Address 69 SKYLIN	·	Date of Receipt    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.70631
UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	NJ 07458	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTION:	Occupation VP INFO TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle In JANE BARLOW  Mailing Address 3 AVALON	·	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.70871
HOPEWELL JUNCTION  FEC ID number of contributing federal political committee.	NY 12533	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MEDICAL POLICIES	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
SURTOTAL of Receipts This Pac	e (optional)	150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 335 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	
` '	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MICHAEL BARONE Mailing Address 452 MEDWAY ROAD		Date of Receipt
City	State Zip Code	10 10 2009  Transaction ID: INC.A.70902
HIGHLAND HEIGHTS	OH 44143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4236.65	
Full Name (Last, First, Middle Initial) MR STEPHEN BARROW		Date of Receipt
Mailing Address 7 SOUTHVIEW ROAL		10 10 2009
City	State Zip Code	Transaction ID: INC.A.70711
RANDOLPH	NJ 07869	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify)	550.00	
Full Name (Last, First, Middle Initial) MR DAVID BAUGH		Date of Receipt
Mailing Address 1813 ADONIS AVE		10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HENDERSON	State Zip Code NV 89074	Transaction ID: INC.A.70768
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  58.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MGR BENEFIT DELIVERY SYSTEMS	<del>-</del>
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1220.00	
SUBTOTAL of Receipts This Page (optional) .	•	275.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. In Solution 1985.	Statements may not be sold or used by any person and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR PETER BEGANS Mailing Address 1605 CHARNITA CT  City VIENNA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code VA 22182  C  Occupation VP GOVERNMENT AFFAIRS  Aggregate Year-to-Date  2200.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR STEPHEN BELL Mailing Address 24 GLENWOOD ROA  City UPPER SADDLE RIVER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	D  State Zip Code NJ 07458  C  Occupation VP FINANCE  Aggregate Year-to-Date ▼  1100.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS FRANCINE BELLOFATTO Mailing Address 4603 TUDOR DR  City POMPTON PLAINS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07444  C  Occupation SR DIR CLINICAL SVCS  Aggregate Year-to-Date   550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	175.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) JEAN BERGWALL			Date of Receipt
	Mailing Address 2546 HOLLYHOCK C	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70950
	GERMANTOWN	TN	38138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRO	on DDUCT LINE II	
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼		550.00	
В.	Full Name (Last, First, Middle Initial) MR DAVID BERRY			Date of Receipt
	Mailing Address 11 COBBLESTONE L	ANE		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70629
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
_ С.	Full Name (Last, First, Middle Initial) MS EILEEN BIDELL			Date of Receipt
	Mailing Address 71 WASHINGTON CT	Γ.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.70625
	TOWACO	NJ	07082	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on PHARM OPS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
Γ,	SUBTOTAL of Receipts This Page (optional)	<u> </u>		75.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 335 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	ress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR FLOYD BILLINGS Mailing Address 4273 BROGDAN FAF  City BUFORD FEC ID number of contributing	RM COURT  State  GA	Zip Code 30518	Date of Receipt  M M M J D D J D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
rederal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation TECHNIC	AL SPECIALIST Year-to-Date ▼  550.00	
Full Name (Last, First, Middle Initial) CALVIN BINGHAM Mailing Address 13702 W. 48TH ST.			Date of Receipt  10 10 2009
City SHAWNEE	State KS	Zip Code 66216	Transaction ID: INC.A.70928  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR CLIN	ICAL OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO			Date of Receipt
Mailing Address 26 DAYLILY DRIVE			10 10 2009
City	State	Zip Code	Transaction ID: INC.A.70844
MOUNT LAUREL FEC ID number of contributing federal political committee.	NJ C	08054	Amount of Each Receipt this Period  15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 660.00	
SUBTOTAL of Receipts This Page (optional)			65.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN Mailing Address 4500 LINIMOOD LAND			Date of Receipt
	Mailing Address 4520 LINWOOD LANE	<b>=</b>		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70767
	DEEPHAVEN	MN	55331	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP CLI	n ENT & MKT STRATEGIC DI	EV
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	]
В.	Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN	ı		Date of Receipt
	Mailing Address 50 NEW ENGLAND D	10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC.A.70583
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		ING & PRODUCT DEV	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
C.	Full Name (Last, First, Middle Initial) KEN BODMER	•		Date of Receipt
	Mailing Address P.O. BOX 381947			10 10 2009
	City GERMANTOWN	State TN	Zip Code 38183	Transaction ID: INC.A.70675  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation SVP FIN		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4224.00	
	SUBTOTAL of Receipts This Page (optional)		<b>.</b>	292.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any persename and address of any political committee in POLITICAL ACTION COMMITTEE (a.k.	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL BOGDA  Mailing Address 80 LEONA CT  City LEVITTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 11756  C  Occupation DIR TECHNOLOGY  Aggregate Year-to-Date ▼  550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MRS HEATHER BONOME Mailing Address 203 12TH STREET N  City WASHINGTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	E  State Zip Code DC 20002  C  Occupation DIR CLINICAL SVCS  Aggregate Year-to-Date ▼  550.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR JOSEPH BOTTA  Mailing Address 109 ARBOR PL  City BRYN MAWR  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code PA 19010  C  Occupation VP SALES  Aggregate Year-to-Date   550.00	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional) .		75.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX			Date of Receipt
	Mailing Address 6527 SHORBURGH [	DRIVE		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70328
	INDIANAPOLIS  FEC ID number of contributing federal political committee.	C	46278	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:		ARM PRACTICE  e Year-to-Date   The state of	
	Primary General Other (specify) ▼	Aggregate	1100.00	
В.	Full Name (Last, First, Middle Initial) RUSS BOURNE			Date of Receipt
	Mailing Address 242 N HIGHLAND			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70948
	MEMPHIS	TN	38111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUS		
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		550.00	
C.	Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN			Date of Receipt
	Mailing Address 5259 FISHERCREST LN			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70719
	RICHMOND  FEC ID number of contributing federal political committee.	C	23231	Amount of Each Receipt this Period  200.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FOR	on MULARY CONSULTING	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 4400.00	
	SUBTOTAL of Receipts This Page (optional) .			250.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) KAREN BOWE	Date of Receipt		
	Mailing Address 1413 LIMERICK COU	10 10 2009		
	City HUMMELSTOWN	State PA	Zip Code 17036	Transaction ID: INC.A.70909  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR NAT	on TL CUST RELATIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN	<u> </u>		Date of Receipt
	Mailing Address 15 DAWN LANE	10 10 2009		
	City State RINGWOOD NJ		Zip Code 07456	Transaction ID: INC.A.70764
	FEC ID number of contributing federal political committee.	C	07436	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	on IR STRAT PRODUCT MGM <sup>-</sup>	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
C.	Full Name (Last, First, Middle Initial) MR KEITH BRADBURY			Date of Receipt
	Mailing Address 122 DERFUSS LN			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70389
	BLAUVELT  FEC ID number of contributing federal political committee.	C	10913	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	on IR DRUG INFO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)	1		100.00
	TOTAL This Period (last page this line number	only)	·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS PATRICIA BRANUM Mailing Address 240 FDCC LIGHTOWN	2045		Date of Receipt
	Mailing Address 210 FROG HOLLOW F			10 10 2009
	City COATESVILLE	State PA	Zip Code 19320	Transaction ID: INC.A.70702  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	19320	Amount of Each Receipt this Period 85.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INFO	n ) & PROCESS ENGINEERIN	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 1710.00	
_ 3.	Full Name (Last, First, Middle Initial) MR JOHN BRENNAN			Date of Receipt
	Mailing Address 2 CARMEN LANE			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70814
	FLEMINGTON  FEC ID number of contributing federal political committee.	C	08822	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP AUD		
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
- ;.	Full Name (Last, First, Middle Initial) MS LINDA BRIDGE			Date of Receipt
	Mailing Address 136 BEECH ST			10 10 2009
	City BELLEVILLE	State NJ	Zip Code 07109	Transaction ID: INC.A.70502  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT/MEMBER COMM	7
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)			160.00
t	TOTAL This Period (last page this line number)	only)	•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR PAUL BRISSON			Date of Receipt
	Mailing Address 469 MANOR LANE  City	State	Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70493
	PELHAM MANOR	NY	10803	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRO	n DDUCT DEVELOPMENT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) MR RICHARD BROOKLER Mailing Addrsos - O DOMARY COLURT			Date of Receipt
	Mailing Address 9 ROMARY COURT			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70382
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		FINANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
с. С.	Full Name (Last, First, Middle Initial) MR KENNETH BROWN			Date of Receipt
	Mailing Address 540 GIORDANO DRIV	E		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70413
	YORKTOWN HEIGHTS  FEC ID number of contributing federal political committee.	C	10598	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ENTE	n ERPRISE BUS INTELLIGEN	CE
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number of		·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any personders of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) STEVEN BROWN			Date of Receipt
	Mailing Address 140 S GROVE PARK  City	State	Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70930
	MEMPHIS	TN	38117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	
– В.	Full Name (Last, First, Middle Initial) AMANDA BUNDY	TD 4 05		Date of Receipt
	Mailing Address 5812 SEVEN POINTS TRACE			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70923
	HERMITAGE	TN	37076	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIM	on MBURSEMENT	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		1100.00	]
с. С.	Full Name (Last, First, Middle Initial) BRIAN BURFORD			Date of Receipt
	Mailing Address 603 CHARLESWOOD	DR		10 10 2009
	City MARION	State AR	Zip Code	Transaction ID: INC.A.70922
	FEC ID number of contributing federal political committee.	C	72364	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR TRC		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	]
	SUBTOTAL of Receipts This Page (optional)		<b>\</b>	100.00
t	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 335 (check only one)  X 11a 11b 11c 12 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persor the name and address of any political committee to so.  C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR KEVIN BURON Mailing Address 25 TIMBERLAND  City ALISO VIEJO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code CA 92656  C  Occupation GENERAL MGR GROUP  Aggregate Year-to-Date ▼  1100.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MRS DOREEN CALDER  Mailing Address 441 S ELM STREE  City  MAYWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NJ 07607  C  Occupation DIR PRODUCT DEVELOPMENT  Aggregate Year-to-Date   880.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MR GABRIEL CAPPUCCI  Mailing Address 119 WASHINGTON  City  CHATHAM  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code NJ 07928  C  Occupation SVP & CONTROLLER  Aggregate Year-to-Date ▼  4230.82	Date of Receipt  M M M / D D / 2 0 0 9  Transaction ID: INC.A.70654  Amount of Each Receipt this Period  192.31
SUBTOTAL of Receipts This Page (optional	)	282.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS IN  Full Name (Last, First, Middle Initial)	C. POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
MR RAYMOND CARLUCCI  Mailing Address 24 SHERI DRIVE		Date of Receipt
City ALLENDALE	State Zip Code NJ 07401	Transaction ID: INC.A.70670  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	52.50
Name of Employer ACCREDO HEALTH GROUP	Occupation GROUP VP MARKET STRATEGY & [	DEV
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00	
Full Name (Last, First, Middle Initial) JOSEPH CASACCIA JR Mailing Address 9788 LIPSEY CV		Date of Receipt
Mailing Address 9700 LIFSET GV	10 10 2009	
City <u>GERMANTOWN</u>	State Zip Code TN 38139	Transaction ID: INC.A.70628
FEC ID number of contributing federal political committee.	C 30139	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PROFESSIONAL PRACTICES	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MS MARY CASALE	'	Date of Receipt
Mailing Address 822 CEDAR AVE		10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.70562
HADDENFIELD  FEC ID number of contributing federal political committee.	NJ 08033	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES STRATEGY & MARKETING	- G
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (option	al)	102.50
TOTAL This Period (last page this line nur	nber only)	

SCHEDULE A (FEC FOITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other  NAME OF COMMITTEE (In Fu	•	person for the purpose of soliciting contributions eee to solicit contributions from such committee.
Full Name (Last, First, Middle In MS KAREN CATHCART RUSSE		a.k.a. Medco Health PAC)  Date of Receipt
Mailing Address 148 CLUB  City	HOUSE DR State Zip Code	1 0 1 0 2 0 0 9 Transaction ID: INC.A.70365
WEST COLUMBIA	SC 29172	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation SR DIR CLINICAL SVCS	
Receipt For:  Primary Genera  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle In MR BARRY CESANEK  Mailing Address 5 LEXING	<u> </u>	Date of Receipt
		10 10 2009
City	State Zip Code	Transaction ID: INC.A.70568
SHAMONG FEC ID number of contributing federal political committee.	NJ 08088	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTION	Occupation DIR PHARM PRACTICE	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	550.00	
Full Name (Last, First, Middle In HWEI-CHUNG CHOU		Date of Receipt
Mailing Address 36 TANGL	EWOOD HOLLOW	10 10 / 2009
City UPPER SADDLE RIVER	State Zip Code  NJ 07458	Transaction ID: INC.A.70881  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation DIR TECHNOLOGY	
Receipt For:  Primary Genera  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SURTOTAL of Receipts This Page	e (optional)	62.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 335 (check only one)    X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal statements and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VIS  City VERADALE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State Zip Code WA 99037  C  Occupation VP/GM  Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS SUSAN COLUCCI Mailing Address 703 SUCCASUNNA	1100.00 RD.	Date of Receipt  10 10 2009
City  LANDING  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NJ 07850  C  Occupation DIR HLTH MGMT  Aggregate Year-to-Date   550.00	Transaction ID: INC.A.70841  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) WILLIAM CONSIDINE Mailing Address 130 WEST 67TH ST  City NEW YORK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	REET, #4J  State Zip Code NY 10023  C  Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date   550.00	Date of Receipt  M M M / D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		75.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial)  MR ROBERT COOK  Mailing Address 270 S FRANKLIN TUI  City		Zip Code	Date of Receipt  10 10 2009  Transaction ID: INC.A.70400
	RAMSEY  FEC ID number of contributing federal political committee.	NJ C	07446	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		n H CARE OPS-TECHNOLOG e Year-to-Date ▼ 550.00	GY
- В.	Full Name (Last, First, Middle Initial) JEFFREY COOLE Mailing Address 155 ASTON HALL DF	RIVE		Date of Receipt  1 0 1 0 2 0 0 9
	City State Zip Code		Transaction ID: INC.A.70921	
	EADS	TN	38028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP TAX	<sup>n</sup> AND REGULATORY REPOI	RT
	Receipt For:  Primary General  Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1100.00	
- С.	Full Name (Last, First, Middle Initial) ANTONIO CORREIA			Date of Receipt
-	Mailing Address 19 WILLIAMS LANE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.70857
	CHAPPAQUA FEC ID number of contributing federal political committee.	C	10514	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS DEV	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
ſ	SUBTOTAL of Receipts This Page (optional) .	1		125.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MRS BARBARA COSGRIFF			Date of Receipt
	Mailing Address 2045 MAYFAIR MCLE	AN COURT		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70897
	FALLS CHURCH	VA	22043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PUI	on BLIC POL&EXTRNL AFFAIR	as
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 975.00	]
ь. В.	Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN			Date of Receipt
	Mailing Address 25 FAIRWAY TRAIL			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70525
	SPARTA	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>, '</del>	ARMACY NETWORK MGM1	<u>r</u>
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4230.82	]
с.	Full Name (Last, First, Middle Initial) MR HART COVEN	•		Date of Receipt
	Mailing Address 28 OAK LANE			10 10 2009
	City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.70639
	FEC ID number of contributing federal political committee.	C	07900	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFC	on O TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)		<b>.</b>	437.31
Ì	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	(X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 335 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	ng the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR ROBERT CRAIG  Mailing Address 7979 E SANTA CA	ATALINA DR		Date of Receipt
City SCOTTSDALE	State AZ	Zip Code 85255	Transaction ID: INC.A.70507  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	<del></del>	R PRODUCT	60.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1320.00	
Full Name (Last, First, Middle Initial) MR PETER CSUTOROS Mailing Address 16 PLEASANT A\	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y		
City	State	Zip Code	Transaction ID: INC.A.70793
LINCOLN PARK  FEC ID number of contributing federal political committee.	C	07035	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA	ANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR ANGELO CUOZZO	•		Date of Receipt
Mailing Address 19 IDA COURT	10 10 2009		
City	State	Zip Code	Transaction ID: INC.A.70574
STATEN ISLAND  FEC ID number of contributing federal political committee.	C	10312	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (option	nal)	<b>)</b>	110.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)  JANET DAGLEY  Mailing Address 721 BROWNLEE DRIV	/F		Date of Receipt
	City	State	Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70949
	NASHVILLE	TN	37205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR MAR	n RKETING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	]
В.	Full Name (Last, First, Middle Initial) MR JOHN DALY Mailing Address 46 BLUEBELL CT			Date of Receipt
				10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70686
	PARAMUS	NJ	07652	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	. '	TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
C.	Full Name (Last, First, Middle Initial) MS ROSELIN DANIEL			Date of Receipt
	Mailing Address 17 DEVONSHIRE DRI			10 10 2009
	City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INC.A.70648
	FEC ID number of contributing federal political committee.	C	0/809	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For:		e Year-to-Date 🔻	
	Primary General Other (specify) ▼		550.00	]
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR KENNETH DANIELS Mailing Address 4156 DUNMORE DRIV	/ <u></u>		Date of Receipt
	City	State	Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70623
	LAKE WALES	FL	33859	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
В.	Full Name (Last, First, Middle Initial) MS MARY DASCHNER			Date of Receipt
	Mailing Address 2926 EWING AVE S			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70489
	MINNEAPOLIS	MN	55416	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP	n PRES RETIREE SOLUTION	IS
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		4230.60	
C.	Full Name (Last, First, Middle Initial) MR ANDREW DAVIS			Date of Receipt
	Mailing Address 5616 BROOK DRIVE			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70504
	EDINA	MN	55439	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		ICARE CLIENT & SALES SU	JP
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1100.00	
	SUBTOTAL of Receipts This Page (optional)	1		267.30
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 335 (check only one)    X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	o solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) MR BARRY DAVIS  Mailing Address 11 WEISS DR  City TOWACO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		ENERAL MGR Year-to-Date ▼  1246.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ 3.	Full Name (Last, First, Middle Initial) WARREN DAVIS Mailing Address 3131 SADDLEGAIT Co	OVE State TN	Zip Code 38138	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For:  Primary  Other (specify)	Occupation DIR BUS		]
<b>—</b>	Full Name (Last, First, Middle Initial) MR DANIEL DAVISON Mailing Address 908 STERLING DRIVE City FRANKLIN LAKES FEC ID number of contributing federal political committee.	State NJ	Zip Code 07417	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		ANCIAL PLANNING  Year-to-Date  1000.00	
[	SUBTOTAL of Receipts This Page (optional)	1		267.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS KATHLEEN DEFABIIS			Date of Receipt
	Mailing Address 104 HUDSON AVE  City	State	Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70749
	WALDWICK	NJ	07463	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT SVC DELIVERY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS	EN OT		Date of Receipt
	Mailing Address W62 N1032 FAIRHAVI	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70594
	CEDARBURG	WI	53012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		ACCT MGMT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
с. С.	Full Name (Last, First, Middle Initial) MR PAUL DELLO RUSSO			Date of Receipt
	Mailing Address 80 HILLSIDE AVENUE			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70552
	GLEN RIDGE  FEC ID number of contributing federal political committee.	C	07028	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST Co		
	Receipt For:  Primary  General  Other (specify)   ▼		e Year-to-Date ▼ 550.00	
г	Cutof (Specify) ¥	0 0		1
	SUBTOTAL of Receipts This Page (optional)		<b>)</b>	75.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS TONI DEMANSS			Date of Receipt
	Mailing Address 32 RED BARN LANE	Ctata	7:n Oada	10 10 2009
	City WEST MILFORD	State NJ	Zip Code 07480	Transaction ID: INC.A.70813  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) MS ANN-MARGARET DEMARCO Mailing Address 1 RUGBY ROAD	1		Date of Receipt
	City	State	Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70401
	CEDAR GROVE	NJ	07009	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
С.	Full Name (Last, First, Middle Initial) MS MAUREEN DEMPSEY			Date of Receipt
-	Mailing Address 17 RICHWOOD PLAC	E		M M / D D / Y Y Y Y Y Y 1 Y 1 D D / 2009
	City DENVILLE	State NJ	Zip Code 07834	Transaction ID: INC.A.70834
	FEC ID number of contributing federal political committee.	C	0/004	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR MED	n DICARE COMPLIANCE	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)	1	<b>)</b>	75.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 335 (check only one)    X   11a
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES DENBY Mailing Address 78 SHERWOOD S'  City CLIFTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07013  C  Occupation SR DIR FINANCE  Aggregate Year-to-Date   550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR JOHN DERRICO Mailing Address 195 HACKENSACK  City HARRINGTON PARK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07640  C Occupation	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General Other (specify)   Full Name (Last, First, Middle Initial) MS LAURA DEVEAU Mailing Address 2289 BEDFORD S	SR DIR MARKETING  Aggregate Year-to-Date ▼  550.00	Date of Receipt
City STAMFORD  FEC ID number of contributing federal political committee.	State Zip Code CT 06905	Transaction ID: INC.A.70584  Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼	Occupation AVP MARKETING  Aggregate Year-to-Date   550.00	
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	75.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 335 (check only one)    X		
or for commercial purposes, other than use NAME OF COMMITTEE (In Full)	s and Statements may not be sold or used by any personal sing the name and address of any political committee to INC. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.		
Full Name (Last, First, Middle Initial)  MS KAREN DEZEARN  Mailing Address 4740 BRINKLEY	/ LANE NE	Date of Receipt		
City ATLANTA	State Zip Code GA 30342	Transaction ID: INC.A.70367  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	25.00		
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date   550.00			
Full Name (Last, First, Middle Initial) ANDREW DOEDYNS Mailing Address 117 CREST DR	IVE	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	City State Zip Code			
BEAVER	PA 15009	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	25.00		
Name of Employer ACCREDO HEALTH GROUP Receipt For:	Occupation DIR REGIONAL OPS			
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial) MR ROBERT DOLAN		Date of Receipt		
Mailing Address 9 CRANE AVEN	10 10 2009			
City	State Zip Code	Transaction ID: INC.A.70651		
WEST CALDWELL  FEC ID number of contributing federal political committee.	NJ 07006	Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00			
SUBTOTAL of Receipts This Page (opt	ional)	75.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Pa	ne (crieck offly offe)
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and address of any political com	ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.  E (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS JUDITH DONNELLY Mailing Address 3 IRONWORKS ROA  City MONROE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10950  C  Occupation DIR FINANCE  Aggregate Year-to-Date   550.	Date of Receipt  M M M D D D D 2009  Transaction ID: INC.A.70746  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS MERIDITH DORNER Mailing Address 8010 ORCHARD VIEV  City FOGELSVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)		Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MICHEL DUFRESNE  Mailing Address 58 INDEPENDENCE  City MORRIS TWP  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	NAY  State Zip Code NJ 07960  C  Occupation VP ENTERPRISE BUS INTEL  Aggregate Year-to-Date ▼  4230.	
SUBTOTAL of Receipts This Page (optional)		242.30

MEDOO HE'NI TH COLUTIONS	ne and address of any political committee to some any politic	solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) MR DANA DUNCAN Mailing Address 125 COMSTOCK TRAIL  City EAST HAMPTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)  Cher (specify)  MR PETER DUNLEAVY  Mailing Address 2 DECKER TERRACE  City KINNELON	State Zip Code CT 06424  C	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
MR DANA DUNCAN  Mailing Address 125 COMSTOCK TRAIL  City  EAST HAMPTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)   Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY  Mailing Address 2 DECKER TERRACE  City KINNELON	CT 06424  C Occupation	Transaction ID: INC.A.70573  Amount of Each Receipt this Period		
City  EAST HAMPTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)  Other (specify)  Full Name (Last, First, Middle Initial)  MR PETER DUNLEAVY  Mailing Address 2 DECKER TERRACE  City KINNELON	CT 06424  C Occupation	Transaction ID: INC.A.70573  Amount of Each Receipt this Period		
EAST HAMPTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY  Mailing Address 2 DECKER TERRACE  City  KINNELON	CT 06424  C Occupation	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY Mailing Address 2 DECKER TERRACE  City KINNELON	Occupation			
Receipt For:  Primary General  Other (specify)   Full Name (Last, First, Middle Initial)  MR PETER DUNLEAVY  Mailing Address 2 DECKER TERRACE  City  KINNELON	•			
Receipt For:  Primary General Other (specify)  Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY Mailing Address 2 DECKER TERRACE City KINNELON	SR DIR TECHNOLOGY	-		
MR PETER DUNLEAVY  Mailing Address 2 DECKER TERRACE  City  KINNELON	Aggregate Year-to-Date ▼ 550.00			
City KINNELON		Date of Receipt		
KINNELON	Mailing Address 2 DECKER TERRACE			
	State Zip Code	Transaction ID: INC.A.70421		
federal political committee.	NJ 07405	Amount of Each Receipt this Period  25.00		
MEDCO HE'ALTH COLLITIONS	Occupation SR DIR FINANCE	]		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY		Date of Receipt		
Mailing Address 14026 KNOX STREET		10 10 2009		
City OVERLAND PARK	State Zip Code KS 66221	Transaction ID: INC.A.70454  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
	Occupation VP SALES SEGMENT LEADER	1		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00			
SUBTOTAL of Receipts This Page (optional)				

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 7
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers g the name and address of any political committee t	
MEDCO HEALTH SOLUTIONS IN	C. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MARK DUNN Meiling Address - C.O.D. N.W. L. DOAS		Date of Receipt
Mailing Address 2 OLD MILL ROAD City	State Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70425
SANDY HOOK	CT 06482	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 620.00	
Full Name (Last, First, Middle Initial) MR PETER DURAN		Date of Receipt
Mailing Address 875 HARRISTOWI		10 10 2009
City	State Zip Code	Transaction ID: INC.A.70406
GLEN ROCK	NJ 07452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRIVACY	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	550.00	
Full Name (Last, First, Middle Initial) DR SUMIT DUTTA	•	Date of Receipt
Mailing Address 534 HUDSON STF #3 C		10 10 2009
City NEW YORK	State Zip Code NY 10014	Transaction ID: INC.A.70565  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2269.00	
SUBTOTAL of Receipts This Page (option	al)	252.00

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 49 / 335   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) REBECCA DYER			Date of Receipt
Mailing Address 1400 POPLAR ES	TATES PKY		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GERMANTOWN	State TN	Zip Code 38138	Transaction ID: INC.A.70929  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR RN F	n PERF MGMT & IMPROVEM	— ENT
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS	I		Date of Receipt
Mailing Address 109 KAREN PLAC	E		10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.70412  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07401	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD			Date of Receipt
Mailing Address 128 SUMMIT AVE	NUE		10 10 2009
City UPPER MONTCLAIR	State NJ	Zip Code 07043	Transaction ID: INC.A.70818
FEC ID number of contributing federal political committee.	C	07043	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MEDICAL	n RE CHIEF MEDICAL OFFIC	EER
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
	ıal)		125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 335 (check only one)    X
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR FREDERICK ELSTON Mailing Address 106 GRAHAM TER	RRACE	Date of Receipt
City SADDLE BROOK FEC ID number of contributing federal political committee.	State Zip Code NJ 07663	Transaction ID: INC.A.70636  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation TECHNICAL SPECIALIST  Aggregate Year-to-Date   550.00	
Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN Mailing Address 359 LONG HILL R	OAD EAST	Date of Receipt
City BRIARCLIFF MANOR	State Zip Code NY 10510	Transaction ID: INC.A.70821  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP COMMUNICATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN		Date of Receipt
Mailing Address 75 TWEED BLVD		10 10 2009
City UPPER GRANDVIEW	State Zip Code NY 10960	Transaction ID: INC.A.70317  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CMO SVP MEDICAL&ANLYTC AFF	RS
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.82	
	· · · · · · · · · · · · · · · · · · ·	

ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 51/335   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR SCOTT ERHARDT			Date of Receipt
Mailing Address 11540 39TH AVE N	I		M M / D D / Y Y Y Y Y Y 1 1 0 1 0 2 0 0 9
City	State MN	Zip Code	Transaction ID: INC.A.70510
PLYMOUTH  FEC ID number of contributing federal political committee.	C	55441	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R ACCT MGMT	
Receipt For:  Primary General  Other (specify)	<del></del>	Year-to-Date ▼ 925.00	
Full Name (Last, First, Middle Initial) MR YAKOV ESTERLIS			Date of Receipt
Mailing Address 100 WINSTON DRI 17 C NORTH	IVE		10 10 2009
City CLIFFSIDE PARK	State <b>NJ</b>	Zip Code 07010	Transaction ID: INC.A.70751  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07010	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 3	n FECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	- <del></del>	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI			Date of Receipt
Mailing Address 15804 SORAWATE	ER DR.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LITHIA	State FL	Zip Code 33547	Transaction ID: INC.A.70434
FEC ID number of contributing federal political committee.	C	33347	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 840.00	
SUBTOTAL of Receipts This Page (optional	.0		125.00

SCHEDULE A (FEC Form	for	se separate schedule(s) reach category of the etailed Summary Page	Check only one
Any information copied from such Report for commercial purposes, other than	rts and Statements may not busing the name and address	pe sold or used by any perso of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTION:	S INC. POLITICAL ACTION	ON COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) RICHARD FARIS			Date of Receipt
Mailing Address 2020 HEATHE	R COVE		10 10 2009
City MEMPHIS		Zip Code 38119	Transaction ID: INC.A.70945  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP HEALTH (	OUTCOME SOLUTIONS	<del>-</del> S
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year	to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) SUSAN FAUST	I		Date of Receipt
	SWOOD COVE		10 10 2009
City MEMPHIS		Zip Code 38119	Transaction ID: INC.A.70914  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP CLIENT S	LS AND MGD CARE	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year		
Full Name (Last, First, Middle Initial) DR RICHARD FEIFER	I		Date of Receipt
Mailing Address 32 EILEEN DF			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		Zip Code	Transaction ID: INC.A.70494
MAHWAH  FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CARE EN	HANCING SOLUTIONS	3
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year		
SUBTOTAL of Receipts This Page (o	otional)		150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR THOMAS FEITEL  Mailing Address 58 APPLE HILL DR			Date of Receipt
City GILLETTE FEC ID number of contributing	State NJ	Zip Code 07933	Transaction ID: INC.A.70557  Amount of Each Receipt this Period  192.23
Receipt For:  Primary  Other (specify) ▼	Occupation SVP COI	n RP MKTG & E-COMM Year-to-Date ▼ 4229.06	]
Full Name (Last, First, Middle Initial) MR STUART FELDMAN Mailing Address 109 MEADOWBRO	OK ROAD		Date of Receipt  1 0 1 0 2 0 0 9
City RANDOLPH  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07869	Transaction ID: INC.A.70314  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation EXEC DI	n R TECHNOLOGY • Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MS DAWN FELDNER Mailing Address 275 BIRCH STREE	 T		Date of Receipt
City  EMERSON  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07630	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70721  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	<del> </del>	n SINESS REQUIREMENTS Year-to-Date ▼ 550.00	
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional	)	0 0 0 0 0 0 0	242.23

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 335 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS FERRAZZANO Mailing Address 464 SPRING AVE.  City RIDGEWOOD FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	<del></del> '	Zip Code 07450 n TECHNOLOGY	Date of Receipt  10 10 2009  Transaction ID: INC.A.70672  Amount of Each Receipt this Period  25.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) RONALD FIELMANN Mailing Address 2061 ARLEEN CT	0 0	550.00	Date of Receipt  1 0 1 0 2 0 0 9
City SCHAUMBURG  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State IL C Occupatio AVP SAL Aggregate		Transaction ID: INC.A.70915  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  MR DON FISCHER  Mailing Address 10 TRACY CIRCLE  City  CAMPBELL HALL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	_ '	Zip Code 10916  n TECHNOLOGY e Year-to-Date  550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .  TOTAL This Period (last page this line number		•	75.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR EDWARD FISCHER  Mailing Address 465 OLD STONE RI	<u> </u>		Date of Receipt
City	State	Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70483
RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIN	n ICAL PROD INTEGRATION	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MEGHAN FITZGERALD			Date of Receipt
Mailing Address 6 MORGAN AVE			10 10 2009
City NORWALK	State CT	Zip Code 06851	Transaction ID: INC.A.70878
FEC ID number of contributing federal political committee.	C	00001	Amount of Each Receipt this Period  192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP BUS	n SINESS DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 4230.82	
Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS			Date of Receipt
Mailing Address 1933 MT. OLIVE AGOSTA ROAD			10 10 2009
City NEW BLOOMINGTON	State OH	Zip Code 43341	Transaction ID: INC.A.70611  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n HLTH CARE OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional	)		267.31

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	ly not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) CHAD FOREMAN			Date of Receipt
	Mailing Address 9544 DOGWOOD ES	TATES		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70951
	GERMANTOWN  FEC ID number of contributing federal political committee.	C	38139	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) HOLLEY FORTH			Date of Receipt
	Mailing Address 115 BAYSIDE COURT			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70942
	RICHMOND  FEC ID number of contributing federal political committee.	CA	94804	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation GENER/	on AL MGR - MULTI BRANCH	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	]
C.	Full Name (Last, First, Middle Initial) KEVIN FRANCO			Date of Receipt
	Mailing Address 648 RIVERSIDE DR #222			10 10 2009
	City MEMPHIS	State TN	Zip Code 38103	Transaction ID: INC.A.70687  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number	only)	······································	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persor go the name and address of any political committee to sold.  NC. POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO		Date of Receipt
Mailing Address 9 GREEN HILL TF	RAIL	10 10 2009
City	State Zip Code	Transaction ID: INC.A.70627
TROPHY CLUB  FEC ID number of contributing federal political committee.	TX 76262	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATIONAL SERVICE CENTER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	
Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL		Date of Receipt
Mailing Address 1434 NARRAGAN	ISETT BLVD	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CRANSTON	State Zip Code RI 02905	Transaction ID: INC.A.70445  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR GOV AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	
Full Name (Last, First, Middle Initial) FELIX FRUEH		Date of Receipt
Mailing Address 14401 FALLING L	EAF DRIVE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City DARNESTOWN	State Zip Code MD 20878	Transaction ID: INC.A.70879  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP RESEARCH & DEVELOPMENT	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (option	nal)	130.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 335 (check only one)    X
or for commercial purposes, other than using t	Statements may not be sold or used by any per he name and address of any political committee  POLITICAL ACTION COMMITTEE (a.k	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ROBERT FURTH Mailing Address 1450 PORTLAND AV  City ST PAUL  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	, ,	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI Mailing Address 24 MOREHOUSE PI  City NEW PROVIDENCE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07974  C  Occupation VP & COUNSEL  Aggregate Year-to-Date   1100.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI  Mailing Address 720 N. LARRABEE APT 1701  City CHICAGO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code IL 60654  C  Occupation SVP & GENERAL MGR  Aggregate Year-to-Date   4230.82	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		267.31

or for commercial purposes, other than using the name and addres  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACT  Full Name (Last, First, Middle Initial)  MS PATRICIA GALLAGHER  Mailing Address 842 ASHLER CT  City State  COLUMBUS OH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Occupation NATL ACCT	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MS PATRICIA GALLAGHER  Mailing Address 842 ASHLER CT  City State  COLUMBUS OH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  ACT  CITY  Coccupation  NATL ACCT  Aggregate Year	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
MS PATRICIA GALLAGHER  Mailing Address 842 ASHLER CT  City State  COLUMBUS OH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Aggregate Year Aggregat	Zip Code 43235  Transaction ID: INC.A.70722  Amount of Each Receipt this Period  25.00  T EXEC par-to-Date
City State COLUMBUS OH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  State OH  C  Aggregate Yea	1 0 1 0 2 0 0 9
COLUMBUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  OH  OCCUPATION  Aggregate Yea	Amount of Each Receipt this Period  25.00  T EXEC par-to-Date ▼
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  C Occupation NATL ACCT Aggregate Yea	T EXEC ear-to-Date ▼
rederal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Occupation NATL ACCT Aggregate Yea	T EXEC ear-to-Date ▼
Receipt For:  Primary  General  Aggregate Yea	ear-to-Date ▼
Primary General	
	550.00
Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO	Date of Receipt
Mailing Address 69 LAKEVIEW DR	10 10 2009
City State	Zip Code Transaction ID: INC.A.70604
OLD TAPPAN NJ	07675 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Occupation VP CLIENT	RELATIONS
Receipt For:  Primary General  Other (specify) ▼  Aggregate Yea	ear-to-Date ▼ 1100.00
Full Name (Last, First, Middle Initial) MICHAEL GALVIN	Date of Receipt
Mailing Address 25 BALLYMEADE ROAD	10 10 2009
City State	Zip Code Transaction ID: INC.A.70797
HOPEWELL JUNCTION NY	12533 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	192.31
Name of Employer MEDCO HEALTH SOLUTIONS Occupation SVP/CHIEF	INFRASTRUCTURE OFFR
Receipt For: Aggregate Year	ear-to-Date ▼
Primary General Other (specify) ▼	4230.82
SUBTOTAL of Receipts This Page (optional)	267.31

TOTAL This Period (last page this line number only) .....

ITEMIZED RE	(FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
Any information copies or for commercial purp	d from such Reports and Staten poses, other than using the nam	nents may ne and addr	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMM MEDCO HEALT	, ,	ITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
	AM GANGAIKONDAN-IYER			Date of Receipt
Mailing Address	9 CAIRNES ROAD			10 10 2009
City	_	State	Zip Code	Transaction ID: INC.A.70806
MORRIS PLAIN FEC ID number of federal political cor	contributing	NJ C	07950	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH	SOLUTIONS C	Occupation DIR TECH	HNOLOGY	
Receipt For: Primary Other (specif	General	Aggregate `	Year-to-Date ▼ 550.00	
Full Name (Last, F				Date of Receipt
	1201 BRIDGE STREET			10 10 2009
City ASBURY PARK		State NJ	Zip Code 07712	Transaction ID: INC.A.70312  Amount of Each Receipt this Period
FEC ID number of federal political cor	contributing	C	OTTE.	60.00
Name of Employer MEDCO HEALTH	SOLUTIONS	Occupation SVP TREA	ASURY & FINANCIAL EVA	LS
Receipt For: Primary Other (specif	General	Aggregate '	Year-to-Date ▼ 1290.00	
Full Name (Last, F				Date of Receipt
Mailing Address	20 BROOKSHIRE DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ROBBINSVILLE		State NJ	Zip Code 08691	Transaction ID: INC.A.70460
FEC ID number of federal political cor	contributing	C	00091	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH	SOLUTIONS	Occupation SENERAL	L MGR GROUP	
Receipt For: Primary Other (specif	General	Aggregate `	Year-to-Date ▼ 1100.00	
SUBTOTAL of Rece	pts This Page (optional)			135.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 335 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MATTHEW GIBBS			Date of Receipt
Mailing Address 27 N. WACKER DR. SUITE 246			10 10 2009
City CHICAGO	State IL	Zip Code 60606	Transaction ID: INC.A.70866  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio CHIEF C	n CLINICAL OFFICER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1650.00	
Full Name (Last, First, Middle Initial) MR ROBERT GIBBS			Date of Receipt
Mailing Address 544 DENMOOR COU	RT		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City GALLOWAY	State OH	Zip Code 43119	Transaction ID: INC.A.70387  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n ARM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR THOMAS GILSON			Date of Receipt
Mailing Address 2 PELL FARM ROAD			10 10 2009
City SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.70755  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	n ENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4230.82	
SUBTOTAL of Receipts This Page (optional)	1		279.81

TOTAL This Period (last page this line number only) .....

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 62 / 335   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR SCOTT GILYARD			Date of Receipt
Mailing Address 305 BERGAMOT D	DRIVE		M M / D D / Y Y Y Y Y Y 1 1 0 1 0 2 0 0 9
City MEDINA	State MN	Zip Code 55340	Transaction ID: INC.A.70318  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES UP		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 4230.60	
Full Name (Last, First, Middle Initial) MR JONAH GITLITZ			Date of Receipt
Mailing Address 43 OVERLOOK RI	DGE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.70398  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	n - ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	<u> </u>	e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MR JAMES GORMAN			Date of Receipt
Mailing Address 11 WASHBURN R	D		M M / D D / Y Y Y Y Y 1 Y 1 1 0 1 0 0 9
City CANTON	State CT	Zip Code 06022	Transaction ID: INC.A.70403  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00022	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CLIENT & MKT PROG STRA	AT
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (options	-I)		267.30

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 335 (check only one)    X
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
٩.	Full Name (Last, First, Middle Initial) MR JAMES GRANT, JR			Date of Receipt
	Mailing Address 1928 BEVERLY LANE			10 10 2009
	City BUFFALO GROVE	State IL	Zip Code 60089	Transaction ID: INC.A.70474  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA	n NCIAL INSIGHTS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	]
_ 3.	Full Name (Last, First, Middle Initial) LAURIE GREENBERG	<b>I</b>		Date of Receipt
	Mailing Address 27760 WOODLAND G	GREEN		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.70876
	BOERNE FEO. ID acceptance of a contribution	TX	78015	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n CLINICAL THERAPEUTICS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		550.00	
- ;.	Full Name (Last, First, Middle Initial) MR EDWARD GRIX			Date of Receipt
	Mailing Address 525 ORANGEBURG F	RD		10 10 2009
	City	State NY	Zip Code	Transaction ID: INC.A.70497
	PEARL RIVER  FEC ID number of contributing federal political committee.	C	10965	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS REQUIREMENT	S
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	1	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	e name and addres	s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS GINA GRUHN Mailing Address 13 WEATHER VANE  City CONVENT STATION  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupation	Zip Code 07960 VP SALES-SYSTEMED ar-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS TRACY GRUNSFELD  Mailing Address 264 HARVEST AVE  City STATEN ISLAND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State NY  C  Occupation VP CONSUI  Aggregate Ye	Zip Code 10310  MER DRIVEN MKTS ar-to-Date ▼ 1100.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MRS CAROLYN GUGLIELMO  Mailing Address 42 VETERANS PARK  City PEARL RIVER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NY  C  Occupation NATL ACCT Aggregate Ye		Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			115.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 335 (check only one)    X   11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any personderss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
2	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)  MR RICHARD GUIOR  Mailing Address 50 BELLEVUE AVE			Date of Receipt
				10 10 2009
	City	State NJ	Zip Code	Transaction ID: INC.A.70336
	SUMMIT  FEC ID number of contributing federal political committee.	C	07901	Amount of Each Receipt this Period  90.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP		
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1980.00	
- В.	Full Name (Last, First, Middle Initial) MS KAVITHA GULLAPALLI			Date of Receipt
	Mailing Address 67 ATHERTON CT			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70473
	WAYNE	NJ	07470	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	T -	CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
С. С.	Full Name (Last, First, Middle Initial) MS VALERIE HAERTEL			Date of Receipt
	Mailing Address 7 PARSLOE COURT			10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.70851  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07430	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INVE	STOR RELATIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			165.00
t	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 335 (check only one)    X   11a
\[ \]	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MR MARK HALLORAN			Date of Receipt
	Mailing Address 19 KINGS RIDGE ROA	AD		10 10 2009
	City LONG VALLEY	State NJ	Zip Code 07853	Transaction ID: INC.A.70637  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07033	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIFF II	on NFO OFFICER	
	Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 4230.82	
- 3.	Full Name (Last, First, Middle Initial) MR GREGORY HANSEN			Date of Receipt
	Mailing Address 1659 ISABELLA PARK	WAY		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70762
	CHASKA FEC ID number of contributing federal political committee.	C	55318	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACC	on T SVCS & ADMIN	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	]
	Full Name (Last, First, Middle Initial) MR CHRISTOPHER HARLOW Mailing Address 8 PROSPECT PLACE			Date of Receipt  1 0 1 0 2 0 0 9
	City	State	Zip Code	Transaction ID: INC.A.70379
	POMPTON PLAINS  FEC ID number of contributing federal political committee.	C	07444	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on FINANCE	
	Receipt For:  Primary  General  Other (specify) ▼	, '	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)			267.31
-	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number			267.3

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
\ \ \	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
\ <b>\</b> .	Full Name (Last, First, Middle Initial) SHARON HARRIS		(4.1.0	Date of Receipt
	Mailing Address 186 N. WHITE STATIC	ON RD State	Zip Code	10 10 2009
	City MEMPHIS	TN	38117	Transaction ID: INC.A.70917  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR HR	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- 3.	Full Name (Last, First, Middle Initial) MR MARK HARTMANN Mailing Address 2000 (ANOR) F. COURT	-		Date of Receipt
	Mailing Address 8980 KNOBLE COURT			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70512
	EDEN PRAIRIE	MN	55347	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC	on DT MGMT	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	]
	Full Name (Last, First, Middle Initial) MR PETER HARTY			Date of Receipt
	Mailing Address 19520 YELLOW WING	COURT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City COLORADO SPRINGS	State CO	Zip Code 80908	Transaction ID: INC.A.70315  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP GOV	n ERNMENT AFFAIRS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4230.82	
	SUBTOTAL of Receipts This Page (optional)			242.31
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  DAN HAYES  Mailing Address 4679 AYRON TERRA  City  PALM HARBOR  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary  General  Other (specify)	State FL  C  Occupatio VP OPS	Zip Code 34685 n e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  1 0 2 0 0 9  Transaction ID: INC.A.70910  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR MARK HEGGESTAD Mailing Address 13210 N. 11TH AVE.  City PHOENIX  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State AZ  C  Occupatio VP SALE		Date of Receipt  M M M / D D / 2009  Transaction ID: INC.A.70417  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR THOMAS HEKKER Mailing Address 28 WEST THRID ST  City SOUTH ORANGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupatio SR DIR	Zip Code 07079 n TECHNOLOGY e Year-to-Date ▼	Date of Receipt  M M J D D J 2009  Transaction ID: INC.A.70803  Amount of Each Receipt this Period  30.00
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	105.00

Any information copied from such Reports and		Detailed Summary Page	X   11a
or for commercial purposes, other than using the	d Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR SCOTT HELMUS			Date of Receipt
Mailing Address 23 VALLEY RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.70393
SUCCASUNNA  FEC ID number of contributing federal political committee.	C	07876	Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIE	n NT SOLUTIONS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1650.00	
Full Name (Last, First, Middle Initial) MR GLENN HERDLING			Date of Receipt
Mailing Address 646 JAMES LN			10 10 2009
City RIVER VALE	State <b>NJ</b>	Zip Code 07675	Transaction ID: INC.A.70529  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07073	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CRE	n ATIVE DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR ERIC HESS			Date of Receipt
Mailing Address 10 CARLTON RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.70487
FLANDERS  FEC ID number of contributing federal political committee.	C	07836	Amount of Each Receipt this Period  60.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENGI	n NEERING & OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1120.00	
SUBTOTAL of Receipts This Page (optional)	)		160.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma name and ad	ly not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS JANE HILDEBRANDT			Date of Receipt
	Mailing Address 35 CASCADE WAY			10 10 7 2009
	City BUTLER	State NJ	Zip Code 07405	Transaction ID: INC.A.70508  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR E-C	on OM STRAT & DELIV	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) MR DANIEL HLUDZINSKI	<u> </u>		Date of Receipt
	Mailing Address 385 WASHINGTON S	I		10 10 2009
	City TAPPAN	State NY	Zip Code 10983	Transaction ID: INC.A.70744  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	on CAL SPECIALIST	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	]
_ С.	Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON	1		Date of Receipt
	Mailing Address 16 LUTH TERRACE			M M / D D / Y Y Y Y Y Y 1 D D / Y 2 0 0 9
	City WEST ORANGE	State NJ	Zip Code 07052	Transaction ID: INC.A.70609  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGION	on IAL VP PHARMACIES	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
T	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial)  MR GLENN HOFFMAN  Mailing Address 974 HILLCREST ROA  City  RIDGEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State NJ C Occupation VP FACI	LITIES e Year-to-Date ▼ 1100.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) MR TIMOTHY HOGAN Mailing Address 9 HIRLE ST  City CORNWALL ON HUDSON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 12520 on CAL SPECIALIST e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 C.	Full Name (Last, First, Middle Initial) MR ROGER HOLLAND Mailing Address 41 SAINT RAPHAEL City LAGUNA NIGUEL FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State CA C Occupation VP SALE Aggregate		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	UBTOTAL of Receipts This Page (optional)  OTAL This Period (last page this line number		<u> </u>	125.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) MR ROBERT HOLLIS  Mailing Address 88 MILLS STREET  City MORRISTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07960 on BUSINESS DEVELOPMENT e Year-to-Date ▼	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ B.	Full Name (Last, First, Middle Initial) ELIZABETH HOLLOWAY Mailing Address 9222 RANDLE VALLEY  City CORDOVA  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State TN C Occupatio ASSISTA	Zip Code 38018	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<b>c</b> .	Full Name (Last, First, Middle Initial) MR MATTHEW HOLMES Mailing Address 21979 SHADYBROOK  City NOVI  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State MI  C  Occupatio DIR CLIN	Zip Code 48375 n NICAL SVCS e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional)			90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE  City ELMSFORD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NY  C Occupation VP INTE	Zip Code 10523 n RVENTION DELIVERY SYS	Date of Receipt    M M M
Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	<del>-                                    </del>	e Year-to-Date ▼ 1760.00	]
Full Name (Last, First, Middle Initial) RITA HOLT Mailing Address 1558 N PISGAH ROA	AD		Date of Receipt  1 0 1 0 2 0 0 9
City	State	Zip Code	Transaction ID: INC.A.70918
CORDOVA	TN	38016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIN	n IBURSEMENT	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MS CYNTHIA HORN			Date of Receipt
Mailing Address 9553 ANDREW DR			M M / D D / Y Y Y Y Y Y 1 1 0 1 0 2 0 0 9
City	State	Zip Code	Transaction ID: INC.A.70905
TWINSBURG  FEC ID number of contributing federal political committee.	ОН	44087	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CUS		
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optional)			180.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 335 (check only one)    X
or for commercial purposes, other than usin	and Statements may not be sold or used by any persong the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEVEN HOROWITZ Mailing Address 4 MELISSA COUF		Date of Receipt  10 10 2009
City  MONTVILLE  FEC ID number of contributing federal political committee.	State Zip Code NJ 07045	Transaction ID: INC.A.70845  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupation VP BUSINESS PLANNING  Aggregate Year-to-Date ▼  1100.00	
Full Name (Last, First, Middle Initial) LYNN HOSTMYER  Mailing Address 6708 N.W. 112TH		Date of Receipt  1 0 1 0 2 0 0 9
City	State Zip Code	Transaction ID: INC.A.70925
OKLAHOMA CITY  FEC ID number of contributing federal political committee.	OK 73162	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation GENERAL MGR - MULTI BRANCH	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR JEFFREY HULL		Date of Receipt
Mailing Address 2616 S 3B'S & K F	RD	10 10 2009
City GALENA	State Zip Code OH 43021	Transaction ID: INC.A.70614  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C +3021	32.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR HLTH CARE OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 696.00	
SUBTOTAL of Receipts This Page (option	nal)	107.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>A</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 75/335   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MRS KIMBERLY HUMPHRIES			Date of Receipt
Mailing Address 3726 ST PHILIP			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BARTLETT	State TN	Zip Code 38133	Transaction ID: INC.A.70941
FEC ID number of contributing federal political committee.	C	30133	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUSI	n NESS PLANNING	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MR DAVID ISRAEL			Date of Receipt
Mailing Address 730 COLUMBUS A	AVENUE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NEW YORK	State NY	Zip Code 10025	Transaction ID: INC.A.70320  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS DEV	
Receipt For:  Primary General  Other (specify) ▼	- + +	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MS SUSAN ITO			Date of Receipt
Mailing Address 6366 SW 90TH ST	TREET		M M / D D / Y Y Y Y Y Y 1 1 0 1 0 1 0 2 0 0 9
City GAINESVILLE	State FL	Zip Code 32608	Transaction ID: INC.A.70331  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	02000	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	<del>- + -</del>	Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (option	al)		150.00

Any information copied from such Reports a	Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MARIANNE JACKS		Date of Receipt
Mailing Address 329 MORRIS AVE		10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MOUNTAIN LAKES	State Zip Code NJ 07046	Transaction ID: INC.A.70370
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MS MICHELLE JAEGER Mailing Address 302 HERMAN TER	PACE	Date of Receipt
Walling Address 302 FICTIVIAIN 1 EF	INACE	10 10 2009
City	State Zip Code	Transaction ID: INC.A.70808
HOPKINS  FEC ID number of contributing federal political committee.	MN 55343	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR JASON JAMES	I	Date of Receipt
Mailing Address RR 2 BOX 2036		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.70324
CANADENSIS	PA 18325	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	35.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHYSICIAN ENGAGEMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 755.00	
SUBTOTAL of Receipts This Page (optional	al)	110.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and or for commercial purposes, other than using th  NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR TODD JEFFREY	MR TODD JEFFREY				
	Mailing Address 15 ELIZABETH STRE	:E1		10 10 2009		
	City DUMONT	State NJ	Zip Code 07628	Transaction ID: INC.A.70747		
	FEC ID number of contributing federal political committee.	C	07020	Amount of Each Receipt this Period  50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHA	on RM CONTRACT & CONSUL	TING		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00			
В.	Full Name (Last, First, Middle Initial) ROBERT JINKS			Date of Receipt		
	Mailing Address 22 PAGE AVE			10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70383		
	LYNDHURST	NJ	07071	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUS	on INESS REQUIREMENTS			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	]		
с. С.	Full Name (Last, First, Middle Initial) MR WILLIAM JOEL	1		Date of Receipt		
	Mailing Address 32 VENTOSA DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.70548  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	07900	25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ANA	on ALYTICAL SVCS			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00			
	SUBTOTAL of Receipts This Page (optional)	1		125.00		
•	TOTAL This Period (last page this line numbe		<u> </u>			

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one)   X   11a
Any information for for comm	tion copied from such Reports and ercial purposes, other than using th	Statements may	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\	OF COMMITTEE (In Full) O HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	ne (Last, First, Middle Initial) GINA JONES			Date of Receipt
	Address POST OFFICE BOX	752345		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: INC.A.70486
	EGAS  number of contributing olitical committee.	C	89136	Amount of Each Receipt this Period 75.00
Name of ACCREI	Employer DO HEALTH GROUP	Occupatio VP CUS		
	For: mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 1125.00	
	ne (Last, First, Middle Initial) IARD JONES			Date of Receipt
Mailing A	Address 12224 MONTCALM S	10 10 2009		
City CARME	=1	State IN	Zip Code 46032	Transaction ID: INC.A.70692  Amount of Each Receipt this Period
FEC ID r	number of contributing olitical committee.	C	10002	25.00
Name of MEDCO	Employer HEALTH SOLUTIONS	Occupatio VP/GM	n	
	For: mary General ner (specify) ▼		e Year-to-Date ▼ 1100.00	
	ne (Last, First, Middle Initial) HRYN JONSRUD			Date of Receipt
	Address 16357 VICTORIA CU	RVE SE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PRIOR	IAKE	State MN	Zip Code 55372	Transaction ID: INC.A.70539
FEC ID r	number of contributing olitical committee.	C	33372	Amount of Each Receipt this Period  35.00
Name of MEDCO	Employer HEALTH SOLUTIONS	Occupatio DIR CLIE	n ENT & MKT PROG STRAT	
	For: mary General ner (specify) ▼	Aggregate	Year-to-Date ▼ 770.00	
SUBTOTA	L of Receipts This Page (optional)	1		135.00
	L of Receipts This Page (optional) is Period (last page this line numbe		•	135.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEVEN KARATY  Mailing Address 19 PARK AVE  City POMPTON PLAINS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07444  C  Occupation VP OPS PLANNING  Aggregate Year-to-Date   550.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS BECKY KAUS Mailing Address N81 W18359 TOUF  City MENOMONEE FALLS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State Zip Code WI 53051  C  Occupation SR DIR CLINICAL SVCS Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR WILLIAM KEELER Mailing Address 63 MOUNTAIN GLE  City RINGWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07456  C Occupation	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)	TECHNICAL SPECIALIST Aggregate Year-to-Date ▼  550.00	75.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS DEEPTI KEHOE  Mailing Address 995 PINES TERR			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City FRANKLIN LAKES FEC ID number of contributing	State NJ	Zip Code 07417	Transaction ID: INC.A.70430  Amount of Each Receipt this Period  50.00
Receipt For:  Primary  Other (specify)   General  Other (specify)   General	Occupation SVP FIN	n ANCIAL & ANALYTICAL SV Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial)  MR WILLIAM KELLEY, III  Mailing Address 1970 WOODLANDS	S PL		Date of Receipt  1 0 1 0 2 0 0 9
City POWELL	State OH	Zip Code 43065	Transaction ID: INC.A.70605  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼		n AL MGR GROUP • Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MR KEVIN KELLY	l		Date of Receipt
Mailing Address 251 POPLAR AVE		7.0.1	10 10 2009
City <u>HACKENSACK</u>	State NJ	Zip Code 07601	Transaction ID: INC.A.70368  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	<del>- , '</del>	rechnology	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)	·		125.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 335 (check only one)    X   11a		
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	,	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N				
Α.	Full Name (Last, First, Middle Initial) MR PETER KENNY			Date of Receipt		
	Mailing Address 6040 BOULEVARD E	10 10 2009				
	City	State	Zip Code	Transaction ID: INC.A.70723		
	WEST NEW YORK	NJ	07093	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on ACCT MGMT			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary General Other (specify) ▼		550.00			
В.	Full Name (Last, First, Middle Initial) MS LISA KETNER			Date of Receipt		
	Mailing Address 7 POINT VIEW	10 10 2009				
	City	State	Zip Code	Transaction ID: INC.A.70590		
	OAKLAND	NJ	07436	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS		IBER STRATEGY			
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼			
	Other (specify)		1100.00			
С.	Full Name (Last, First, Middle Initial) MS INNA KHANIN	1		Date of Receipt		
	Mailing Address 3403 SPRINGBROO	K DRIVE		10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70800		
	EDISON	NJ	08820	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>_ '</del>	CAL SPECIALIST			
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼			
	Other (specify)		550.00			
	SUBTOTAL of Receipts This Page (optional)			100.00		
	TOTAL This Period (last page this line number		<u> </u>			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			n for the purpose of soliciting contributions solicit contributions from such committee.
2	MEDCO HEALTH SOLUTIONS INC. F  Full Name (Last, First, Middle Initial)	POLITICAL	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Α.	MS DONNA KLEIN  Mailing Address 1080 FOREST CLIFF	DRIVE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City LAKEWOOD	State OH	Zip Code 44107	Transaction ID: INC.A.70903  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- В.	Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER	1 DO A D		Date of Receipt
	Mailing Address 121 CONKLING TOWI	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70734
	CHESTER	NY	10918	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	<del> </del>	ACCT MGMT	
	Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
- C.	Full Name (Last, First, Middle Initial) KENNETH KLEPPER	•		Date of Receipt
	Mailing Address 295 GLEN PLACE			10 10 2009
	City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.70782  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio PRES &	n CHIEF OPERATING OFFICI	T ≣R
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4230.60	
	SUBTOTAL of Receipts This Page (optional)		·····	267.30
Ī	TOTAL This Period (last page this line number	only)	<b>&gt;</b>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	(SX)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 335 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	ng the name and addr	ess of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) RICHARD KLUSOVSKY Mailing Address 1016 FAIRWOOD	) LANE		Date of Receipt
City  ACWORTH  FEC ID number of contributing	State GA	Zip Code 30101	Transaction ID: INC.A.70931  Amount of Each Receipt this Period
Receipt For:  Primary  General	1	AGED CARE  /ear-to-Date ▼  550.00	25.00
Other (specify) ▼  Full Name (Last, First, Middle Initial) MR BRADFORD KOGEN  Mailing Address 555 FORBUSH States  City	State	Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
BOONTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		07005  LIENT RETAIL  /ear-to-Date ▼  550.00	Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI Mailing Address 920 CLARK STRE	ET		Date of Receipt  1 0 1 0 2 0 0 9
City BOWLING GREEN FEC ID number of contributing federal political committee.	State OH	Zip Code 43402	Transaction ID: INC.A.70399  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del></del>	ACCT EXEC Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (option	nal)		100.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than u	ts and Statements may not be sold or used by any personsing the name and address of any political committee to INC. POLITICAL ACTION COMMITTEE (a.k.a.)	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY  Mailing Address 143 DEERFIELI		Date of Receipt
		10 10 2009
City MAHWAH	State Zip Code NJ 07430	Transaction ID: INC.A.70439  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR PRODUCT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR ALEXANDER KRYNICKI		Date of Receipt
Mailing Address 60 BEECH ROA	AD	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RANDOLPH	State Zip Code NJ 07869	Transaction ID: INC.A.70345  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MS BARBARA KRZAK		Date of Receipt
Mailing Address 495 ISLAND W	AY	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City FRANKLIN LAKES	State Zip Code NJ 07417	Transaction ID: INC.A.70645  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	55.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1210.00	
SUBTOTAL of Receipts This Page (op/	tional)	105.00

TOTAL This Period (last page this line number only) .....

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 335 (check only one)    X   11a
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)  MR MICHAEL KRZAN  Mailing Address 2735 YORK RD			Date of Receipt
		01-1-	7's Oads	10 10 2009
	City COLUMBUS	State OH	Zip Code 43221	Transaction ID: INC.A.70707  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGION	on IAL VP PHARMACIES	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
Б.	Full Name (Last, First, Middle Initial) MR DEEPAK KUMAR	Date of Receipt		
	Mailing Address 50 MANCHESTER CT	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70585
	KINNELON FEC ID number of contributing federal political committee.	NJ C	07405	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	on CAL SPECIALIST	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	
с.	Full Name (Last, First, Middle Initial) MATTHEW KUPFERBERG	Date of Receipt		
	Mailing Address 3235 CAMBRIDGE AV APT 2J			10 10 2009
	City BRONX	State NY	Zip Code 10463	Transaction ID: INC.A.70861  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR ATTO		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional) .			100.00
f	TOTAL This Period (last page this line number	only)		

	LE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 335 (check only one)    X   11a
or for commer	on copied from such Reports and S cial purposes, other than using the COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name MR MARK Mailing Add		Date of Receipt		
	dress 18 LADIK PL	10 10 2009		
City MONTVA	ALE	State NJ	Zip Code 07645	Transaction ID: INC.A.70640  Amount of Each Receipt this Period
	mber of contributing tical committee.	С		75.00
	mployer EALTH SOLUTIONS	Occupation VP SVC	n DELIVERY SYSTEM	
Receipt Fo Prima Othe		Aggregate	e Year-to-Date ▼ 1650.00	
JAMES LAN		Date of Receipt		
Mailing Add	dress 10921 MAIN RANGE	10 10 2009		
City	ON.	State	Zip Code	Transaction ID: INC.A.70933
	mber of contributing tical committee.	CO	80127	Amount of Each Receipt this Period  50.00
Name of El ACCREDO	mployer ) HEALTH GROUP	Occupation VP REIM	n IBURSEMENT	
Receipt Fo Prima Othe		Aggregate	e Year-to-Date ▼ 1100.00	
	(Last, First, Middle Initial) RD LAPUSHCHIK	Date of Receipt		
Mailing Add	dress 2 OLD LANE			10 10 2009
City MONTVII	11 5	State NJ	Zip Code 07045	Transaction ID: INC.A.70795
FEC ID nu	mber of contributing tical committee.	C	07043	Amount of Each Receipt this Period  25.00
Name of E MEDCO H	Name of Employer MEDCO HEALTH SOLUTIONS TECHNIC		n CAL SPECIALIST	
Receipt Fo Prima Othe		Aggregate	e Year-to-Date ▼ 550.00	
SUBTOTAL	of Receipts This Page (optional)			150.00
TOTAL This	Period (last page this line number	only)		

Any information copied from such Reports and Star or for commercial purposes, other than using the normal form of the purposes, other than using the normal form of the purposes, other than using the normal form of the purposes, other than using the normal form of the purposes of the purposes.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	OLITICAL A  RT  State CA  C  Occupation SR DIR (  Aggregate	ACTION COMMITTEE (a.k.a  Zip Code 95661	solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER Mailing Address 1100 KIMBERLY COUR  City ROSEVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State CA C Occupation SR DIR ( Aggregate	Zip Code 95661 1 GOVERNMENT AFFAIRS Year-to-Date ▼	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
MS CYNTHIA LAUBACHER  Mailing Address 1100 KIMBERLY COUR  City  ROSEVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General	State CA C Occupation SR DIR ( Aggregate	95661  GOVERNMENT AFFAIRS  Year-to-Date	Transaction ID: INC.A.70592  Amount of Each Receipt this Period		
City  ROSEVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State CA C Occupation SR DIR ( Aggregate	95661  GOVERNMENT AFFAIRS  Year-to-Date	Transaction ID: INC.A.70592  Amount of Each Receipt this Period		
ROSEVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	CA C Occupation SR DIR (	95661  GOVERNMENT AFFAIRS  Year-to-Date	Transaction ID: INC.A.70592  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation SR DIR (	GOVERNMENT AFFAIRS  Year-to-Date	1 1 1 1 1 1 1 1 1		
Receipt For: Primary General	SR DIR (	GOVERNMENT AFFAIRS  Year-to-Date ▼			
Primary General	Aggregate	Year-to-Date ▼			
Full Name (Last, First, Middle Initial) JOSEPH LENZ Mailing Address 1735 LINKENHOLT CO	)VF	Date of Receipt			
		7in Codo	10 10 2009		
City COLLIERVILLE	State TN	Zip Code 38017	Transaction ID: INC.A.70822  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PERF	1 FORMANCE STRATEGY			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00			
Full Name (Last, First, Middle Initial)  EMMA LEVIN					
Mailing Address 18 SALEM RD			Date of Receipt  1 0 1 0 2 0 0 9		
City EAST BRUNSWICK	State NJ	Zip Code 08816	Transaction ID: INC.A.70850		
FEC ID number of contributing federal political committee.	C	00010	Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00			
SUBTOTAL of Receipts This Page (optional)			150.00		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR ROBERT LONG	Date of Receipt				
	Mailing Address 18 HARLIND TERRA	10 10 2009				
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.70580  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	on L ACCT EXEC			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00			
В.	Full Name (Last, First, Middle Initial) MR BRICE LOVE	Date of Receipt				
	Mailing Address 2390 BRANDON RD	10 10 2009				
	City COLUMBUS	State OH	Zip Code 43221	Transaction ID: INC.A.70543  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	40221	12.50		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	on ARM PRACTICE			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	]		
C.	Full Name (Last, First, Middle Initial) MR ROSS LUCE	Date of Receipt				
	Mailing Address 1066 WEST GROVE					
	City GIBSONIA	State PA	Zip Code 15044	Transaction ID: INC.A.70452  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		30.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Name of Employer MEDCO HEALTH SOLUTIONS  Occupation VP/GM				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1320.00			
	SUBTOTAL of Receipts This Page (optional) .			92.50		
	TOTAL This Period (last page this line number	only)	·			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 335 (check only one)    X   11a
(	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and add	ress of any political committee to	o solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) MS VERONA MACMAHON Mailing Address 1504 WEST CULLOM UNIT G	AVE		Date of Receipt  1 0 1 0 2 0 0 9
	City	State	Zip Code	Transaction ID: INC.A.70748
	CHICAGO FEC ID number of contributing federal political committee.	C	60613	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		CCT MGMT OPS Year-to-Date ▼ 550.00	
_ 3.	Full Name (Last, First, Middle Initial) MR KENNETH MALLEY Mailing Address 764 W. SADDLE RIVE	Date of Receipt  1 0 1 0 2 0 0 9		
	City	State	Zip Code	Transaction ID: INC.A.70488
	HO HO KUS	NJ	07423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		OUCT & CHANNEL MKTING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
- }.	Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO Mailing Address 33 HICKORY TAVERN RD			Date of Receipt  10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70333
	GILLETTE  FEC ID number of contributing federal political committee.	C	07933	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAN		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persole name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS ILENE MARCUS  Mailing Address 97 BLUEBERRY DR  City  WOODCLIFF LAKE DR  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)   Other (specify)	State Zip Code NJ 07675  C  Occupation SR DIR FINANCE  Aggregate Year-to-Date   550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MR JOSEPH MARINELLI  Mailing Address 351 SOUND BEACH  City  OLD GREENWICH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General	AVENUE  State Zip Code CT 06870  C  Occupation SR DIR MEDICARE OPS Aggregate Year-to-Date   550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) LORI MARINO Mailing Address 31 UNDERWOOD DI  City WEST ORANGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary Other (specify)		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		100.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL			Date of Receipt
	Mailing Address W144 N7150 TERRA	10 10 2009		
	City MENOMONEE FALLS	State WI	Zip Code 53051	Transaction ID: INC.A.70516  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	]
	Full Name (Last, First, Middle Initial) MR JOSEPH MARSIGLIANO Mailing Address 11 ECHO HILL ROAD	Date of Receipt		
		10 10 2009		
	City MONTVALE	State NJ	Zip Code 07645	Transaction ID: INC.A.70867  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07040	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	
_	Full Name (Last, First, Middle Initial) SHELLY MARTIN	Date of Receipt		
	Mailing Address 9536 DOE MEADOW	M M / D D / Y Y Y Y Y 1 Y 1 D D / 2009		
	City	State	Zip Code	Transaction ID: INC.A.70944
	GERMANTOWN FEC ID number of contributing federal political committee.	C	38139	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR HR	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
Г	SUBTOTAL of Receipts This Page (optional) .	1		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pethe name and address of any political committee.  POLITICAL ACTION COMMITTEE (a.k.)	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) THOMAS MARTIN Mailing Address 1882 E LAUREL HC  City GERMANTOWN FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2275.00	
Full Name (Last, First, Middle Initial) MR TODD MARTIN Mailing Address 11825 SHEPPARDS	S CROSSING	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.70468
CLARKSVILLE	MD 21029	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.60	
Full Name (Last, First, Middle Initial) MR EDWARD MARTINEZ	Date of Receipt	
Mailing Address 35 SALTER PLACE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code NJ 07040	Transaction ID: INC.A.70804
MAPLEWOOD  FEC ID number of contributing federal political committee.	NJ 07040	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PRODUCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional	1	367.30

ITEMIZED RECEIP	CForm 3X) TS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 335 (check only one)    X
or for commercial purposes, o	ther than using the name and a	ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
		. ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Mid			Date of Receipt
Mailing Address 137 W			10 10 2009
City HILLSDALE	State NJ	Zip Code 07642	Transaction ID: INC.A.70694  Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.			192.30
Name of Employer MEDCO HEALTH SOLUT	TIONS Occupat	ion RUG DISTRIB & CONTROL	
Receipt For:  Primary Ge  Other (specify) ▼		tte Year-to-Date ▼ 4230.60	
Full Name (Last, First, Mid MR SHAMUS MC GUIRE	dle Initial)		Date of Receipt
Mailing Address 11 JAF	RDINE COURT	M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1	
City	State	Zip Code	Transaction ID: INC.A.70495
MORRIS PLAINS FEC ID number of contributed federal political committee.	NJ uting	07950	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GRO	Occupat VP SAL	ion LES AND MARKETING	
Receipt For:  Primary Ge  Other (specify) ▼	Aggrega	tte Year-to-Date ▼ 1100.00	
Full Name (Last, First, Mid	dle Initial)	Date of Receipt	
Mailing Address 9600 E	OOVE SPRING CV	10 10 2009	
City GERMANTOWN	State TN	Zip Code 38139	Transaction ID: INC.A.70946  Amount of Each Receipt this Period
FEC ID number of contributed rederal political committee.			50.00
Name of Employer ACCREDO HEALTH GRO	Occupat VP SAL		
Receipt For:  Primary  Ge  Other (specify) ▼	Aggrega	tte Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This	s Page (optional)		292.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 335 (check only one)    X   11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS MCDONALD  Mailing Address 0-45 27TH ST  City FAIR LAWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07410  C  Occupation DIR TECHNOLOGY  Aggregate Year-to-Date   550.00	Date of Receipt    M   M   D   D   2 0 0 9
Full Name (Last, First, Middle Initial) MS ANNE MCGURRIN Mailing Address 28 ROSEMILT PLAC  City MORRISTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07960  C  Occupation DIR MARKET SEGMENT SOLUTION Aggregate Year-to-Date   550.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH Mailing Address 87 ROSELAWN RD  City HIGHLAND MILLS FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10930  C  Occupation ASST GENERAL COUNSEL Aggregate Year-to-Date  4224.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		242.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 335 (check only one)    X			
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any personante name and address of any political committee to	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Full Name (Last, First, Middle Initial)  MR STEVEN MCNAMARA		Date of Receipt			
Mailing Address 112 GREEN TERRA  City	ACE WAY State Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70741			
WEST MILFORD	NJ 07480	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	192.31			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP BUSINESS OPS				
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.82				
Full Name (Last, First, Middle Initial)  MS LAURA MENVILLE		Date of Receipt			
Mailing Address 23 UNION HILL RD	Mailing Address 23 UNION HILL RD				
City	State Zip Code	Transaction ID: INC.A.70771			
MORRIS PLAINS  FEC ID number of contributing	NJ 07950	Amount of Each Receipt this Period			
federal political committee.	C	25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	550.00				
Full Name (Last, First, Middle Initial) MS BARBARA MENZEL					
Mailing Address 921 AMARYLLIS AV	/E	10 10 YYYY 2009			
City	State Zip Code	Transaction ID: INC.A.70391			
ORADELL FEC ID number of contributing	NJ 07649	Amount of Each Receipt this Period			
federal political committee.	C	25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUS PLANNING & ADMIN				
Receipt For:  Primary General	Aggregate Year-to-Date ▼	1			
Other (specify) ▼	550.00				
SUBTOTAL of Receipts This Page (optional	)	242.31			
TOTAL This Period (last page this line numb	per only)				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)  DANETTE MEREDITH  Mailing Address 600 W 2ND AVE			Date of Receipt
				10 10 2009
	City DERRY	State PA	Zip Code 15627	Transaction ID: INC.A.70908  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10027	25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation AVP SAI		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- В.	Full Name (Last, First, Middle Initial) DAVID MILLER	Date of Receipt		
	Mailing Address 7 CLOVER LANE	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70342
	RANDOLPH  FEC ID number of contributing federal political committee.	NJ C	07869	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABO	on OR RELATIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	]
с. С.	Full Name (Last, First, Middle Initial) MRS KAREN MILLER	Date of Receipt		
	Mailing Address 34 MACKENZIE LANE	M M / D D / Y Y Y Y Y 1 D D / 2009		
	City DENVILLE	State NJ	Zip Code 07834	Transaction ID: INC.A.70332  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07007	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	on IR INTERNAL AUDIT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
f	TOTAL This Period (last page this line number	· onlv)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to . POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR GIOVANNI MINARDI Mailing Address 12 LINCOLN ROAD  City KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 07405  C  Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR BHUPESH MISTRY Mailing Address 106 HAMBURG ROA  City PARSIPPANY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS JULIANA MOLEK Mailing Address 8620 LAKE RILEY D  City CHANHASSEN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 335 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	e name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ROBERT MOLONEY Mailing Address 24 ABBINGTON TERI City GLEN ROCK FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07452  C  Occupation TECHNICAL SPECIALIST  Aggregate Year-to-Date  550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR PETER MONKHOUSE Mailing Address 1320 BRONCO CIR  City WARRINGTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code PA 18976  C  Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date   550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY  Mailing Address 86 WELLINGTON AV  City SHORT HILLS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	State Zip Code NJ 07078  C  Occupation GENL C-SEC-SVP PHARM STRA Aggregate Year-to-Date  4224.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		242.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS THERESA MORMILE Mailing Address 59 VALLEY VIEW 7  City MONTVALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07645  C Occupation	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼	VP FINANCE Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MR ROBERT MULLER Mailing Address 69 FERN PLACE City	State Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PARAMUS FEC ID number of contributing federal political committee.	NJ 07652	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation VP HLTH BUS CLIENT ENROLLMNT Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MS BECKY NAGLE Mailing Address 64 WALTER AVE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.70397
HASBROUCK HEIGHTS  FEC ID number of contributing federal political committee.	NJ 07604	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼  1100.00	
SUBTOTAL of Receipts This Page (optional	)	150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separat for each cate Detailed Sur		FOR LINE NUMBER: PAGE 100 / 335 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or a name and address of any poli	used by any person tical committee to s	13 14 15 16 16 for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COM	IMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ANDREW NANICK			Date of Receipt
Mailing Address 220 LAUREL BAY DF			10 10 2009
City	State Zip Code		Transaction ID: INC.A.70402
MURRELLS INLET	SC 29576		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL SV	CS	
Receipt For:	Aggregate Year-to-Date	7	]
Primary General Other (specify) ▼		550.00	
Full Name (Last, First, Middle Initial) JANARDHAN NARAYANAN	1		Date of Receipt
Mailing Address 32 BLACKSTONE DF	IVE		10 10 2009
City	State Zip Code		Transaction ID: INC.A.70877
PRINCETON	NJ 08540		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		39.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MARKET STF	RATEGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	634.00	
Full Name (Last, First, Middle Initial) MS BARBARA NEAVERTH			Date of Receipt
Mailing Address PO BOX 523			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID: INC.A.70376
SUGAR LOAF	NY 10981		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS RI	EQUIREMENTS	
Receipt For:	Aggregate Year-to-Date	7	
Primary General Other (specify) ▼		550.00	
SUBTOTAL of Receipts This Page (optional) .	1		89.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 101 / 335   (check only one)		
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and addr	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MR MICHAEL NICODEMO			Date of Receipt		
Mailing Address 407 MEER AVE	-				
City	State	Zip Code	Transaction ID: INC.A.70740		
WYCKOFF  FEC ID number of contributing federal political committee.	NJ C	07481	Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY			
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼			
Full Name (Last, First, Middle Initial) MS ARLENE NOLAN			Date of Receipt		
Mailing Address 319 BOGERT AVE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.70437  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	07430	50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAN				
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00			
Full Name (Last, First, Middle Initial) MR HAIK NOVSHADIAN			Date of Receipt		
Mailing Address 45 DAVIS ROAD			M M / D D / Y Y Y Y Y 1 1 0 1 0 2 0 0 9		
City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.70519		
FEC ID number of contributing federal political committee.	C	076/1	Amount of Each Receipt this Period  38.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	ICAL THERAPEUTICS			
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 836.00			
SUBTOTAL of Receipts This Page (optional	<b>.</b>		138.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 335 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	Statements may not be sold or used by any person name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JANINE NOWATZKY Mailing Address 24 CHEROKEE TRAIL  City OAKLAND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Date of Receipt  M M M / D D / 2009  Transaction ID: INC.A.70579  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR ROBERT O'CONNELL Mailing Address 12001 PEONY CT  City TAMPA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code FL 33635  C  Occupation DIR SECURITY  Aggregate Year-to-Date ▼  550.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER Mailing Address 6 PARK DR SOUTH  City RYE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10580  C  Occupation GROUP COO  Aggregate Year-to-Date   1100.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		100.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 335 (check only one)    X
An	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P Full Name (Last, First, Middle Initial)	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	MR SUNNY OGBONDA			Date of Receipt
	Mailing Address 79 LAUREL WOOD CO	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70355
	ROCKAWAY TOWNSHIP  FEC ID number of contributing federal political committee.	NJ C	07866	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n SINESS REQUIREMENTS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
— В.	Full Name (Last, First, Middle Initial) MR MELVIN OHL			Date of Receipt
	Mailing Address 274 E FRANKLIN TPK	10 10 2009		
	City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.70666
	FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	n CUREMENT & INVENTORY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
 C.	Full Name (Last, First, Middle Initial) MRS SUE OLIVER			Date of Receipt
	Mailing Address 11 LEE DRIVE			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70676
	NORTH HALEDON  FEC ID number of contributing federal political committee.	NJ C	07508	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
SI	UBTOTAL of Receipts This Page (optional)			125.00
т	OTAL This Period (last page this line number of	only)		

ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 104 / 335   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS CLAUDINE OLSEN			Date of Receipt
Mailing Address 4 HIGHGATE CT			M M / D D / Y Y Y Y Y Y 1 1 0 1 0 2 0 0 9
City SUFFERN	State NY	Zip Code 10901	Transaction ID: INC.A.70717  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10301	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
Receipt For:  Primary General  Other (specify)	<del>- ' '</del>	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) ALEXANDER ONIK			Date of Receipt
Mailing Address 1 SCHINDLER CT	M M / D D / Y Y Y Y Y 1 1 0 1 0 2 0 0 9		
City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.70827
FEC ID number of contributing federal political committee.	C	07436	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIB TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MS NATALYA ONIK			Date of Receipt
Mailing Address 1 SCHINDLER CT			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.70551
FEC ID number of contributing federal political committee.	C	0/436	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optiona			75.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MS LUDIVINA PACAMARRA			Date of Receipt
	Mailing Address 4 TEAK COURT			10 10 2009
	City RINGWOOD	State NJ	Zip Code 07456	Transaction ID: INC.A.70653  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07430	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	<del>- '</del>	e Year-to-Date ▼ 1100.00	
_	Full Name (Last, First, Middle Initial) MS DAWN PAGANO			Date of Receipt
	Mailing Address 185 PASCACK ROAD	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70652
	PARK RIDGE FEC ID number of contributing federal political committee.	C	07656	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify)		1100.00	
	Full Name (Last, First, Middle Initial) MR RICHARD PAGANO			Date of Receipt
	Mailing Address 185 PASCACK RD			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70646
	PARK RIDGE	NJ	07656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS REQUIREMENT:	s
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
Γ,	SUBTOTAL of Receipts This Page (optional) .			125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 106 / 335   (check only one)		
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Full Name (Last, First, Middle Initial)  MRS MICHELE PAIGE			Date of Receipt		
	Mailing Address 12 MILLBROOK COURT				
City	State	Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70541		
LIVINGSTON  FEC ID number of contributing federal political committee.	NJ C	07039	Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP RETI	n REE SOLUTIONS MKTG			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1195.00			
Full Name (Last, First, Middle Initial)  MS GIRA PATEL			Date of Receipt		
Mailing Address 5 FOXHILL RUN	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City MONMOUTH JUNCTION	State NJ	Zip Code 08852	Transaction ID: INC.A.70535  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	00002	25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS REQUIREMENTS	<del>-</del> S		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial) MR JAY PATEL			Date of Receipt		
City HAWTHORNE	State NJ	Zip Code 07506	Transaction ID: INC.A.70812		
FEC ID number of contributing federal political committee.	C	07506	Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00			
SUBTOTAL of Receipts This Page (option	nal)		100.00		
TOTAL This Period (last page this line nur	mber only)				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 335 (check only one)    X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma le name and ad	ly not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MRS CATHY PATTEN			Date of Receipt
	Mailing Address 2001 MEADOWS AV	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70608
	LANTANA  FEC ID number of contributing federal political committee.	C	76226	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
- В.	Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS	Date of Receipt		
	Mailing Address 2780 FOLKSTONE R	10 10 2009		
	City Stat COLUMBUS OH		Zip Code	Transaction ID: INC.A.70409
	COLUMBUS  FEC ID number of contributing federal political committee.	C	43220	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
_ C.	Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI	Date of Receipt		
	Mailing Address 211 WILTSIE COUR	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.70499  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07-101	30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	on D TECHNOLOGY	
	Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		e Year-to-Date ▼ 660.00	
	SUBTOTAL of Receipts This Page (optional)	1		80.00
T	TOTAL This Period (last page this line numbe			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N				
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) MERRI PENDERGRASS, MD			Date of Receipt		
	Mailing Address 3201 QUEENSBURY	10 10 2009				
	City COLLEYVILLE	State TX	Zip Code 76034	Transaction ID: INC.A.70888  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATI	on IONAL PRACTICE LEADER			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00			
- В.	Full Name (Last, First, Middle Initial) JIMMY PERREN	Date of Receipt				
	Mailing Address 1250 BRAY PARK DF	10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	COLUEDANIE TA		Zip Code	Transaction ID: INC.A.70912		
	COLLIERVILLE FEC ID number of contributing federal political committee.	C	38017	Amount of Each Receipt this Period  75.00		
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP REG	ULATORY COMPLIANCE			
	Receipt For:  Primary General  Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1650.00			
с. С.	Full Name (Last, First, Middle Initial) MR MICHAEL PETEROY			Date of Receipt		
	Mailing Address 4769 STAVANGER LA	ANE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City LAS VEGAS	State NV	Zip Code 89147	Transaction ID: INC.A.70630  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	00147	25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	DDUCT DEVELOPMENT			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00			
	SUBTOTAL of Receipts This Page (optional) .	1		150.00		
f	TOTAL This Period (last page this line number		<u> </u>			

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 109 / 335   (check only one)
Any information copied from suc or for commercial purposes, oth	ch Reports and Statements may er than using the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In MEDCO HEALTH SOLU	,	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middl MR NATHAN PETERSON	e Initial)		Date of Receipt
Mailing Address 1520 PE	EMBROKE PASS		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State MN	Zip Code	Transaction ID: INC.A.70511
CHANHASSEN  FEC ID number of contribution federal political committee.		55317	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation NATL AC	n CCT EXEC	
Receipt For:  Primary Gene Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middl MR THOMAS PETTYES	e Initial)		Date of Receipt
Mailing Address 8522 UF	PLAND LN NORTH		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MAPLE GROVE	State MN	Zip Code 55311	Transaction ID: INC.A.70462  Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.		33311	50.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation Occupation GENERA	n AL MGR GROUP	
Receipt For:  Primary Gene  Other (specify) ▼	Aggregate	Year-to-Date ▼	
Full Name (Last, First, Middl MARTINE PFLIEGER	e Initial)		Date of Receipt
Mailing Address 44 HENI	RY TERRACE		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City LINCOLN PARK	State NJ	Zip Code 07035	Transaction ID: INC.A.70858  Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.		77033	25.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation ATTORN		
Receipt For:  Primary Gene  Other (specify) ▼		Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This R	Page (ontional)		100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 335 (check only one)    X
(	Any information copied from such Reports and Stor for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR LOUIS PICONE			Date of Receipt
	Mailing Address 37 TAMARACK DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.70773
	SUCCASUNNA  FEC ID number of contributing federal political committee.	NJ C	07876	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n HNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
– В.	Full Name (Last, First, Middle Initial) MR THOMAS PIERCE			Date of Receipt
<b>-</b> .	Mailing Address 10297 E. LAKE DR.			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City ENGLEWOOD	State CO	Zip Code 80111	Transaction ID: INC.A.70849  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP LABC	n DR RELATIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
- C.	Full Name (Last, First, Middle Initial) DR PAGE PIGG			Date of Receipt
	Mailing Address 9297 ANGLER TRL			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70509
	MECHANICSVILLE FEC ID number of contributing federal political committee.	C	23116	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CLIN	n NICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 335 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal the name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JUDITH PLATKIN Mailing Address 29 BLACKWELL AV  City MORRISTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07960  C Occupation	Date of Receipt    M M M
Receipt For:  Primary General  Other (specify) ▼	SVP & GENERAL MGR Aggregate Year-to-Date ▼ 4230.60	]
Full Name (Last, First, Middle Initial) MS JANET PORAT Mailing Address 5 CRABAPPLE CT  City	State Zip Code	Date of Receipt  10 10 2009  Transaction ID: INC.A.70465
MONSEY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	NY 10952  C Occupation	Amount of Each Receipt this Period  25.00
Receipt For:  Primary General  Other (specify)	DIR TECHNOLOGY  Aggregate Year-to-Date ▼  550.00	]
Full Name (Last, First, Middle Initial) MS LYDIA POTTER Mailing Address 19642 S.W. 88 LOC	)P	Date of Receipt  1 0 1 0 2 0 0 9
City DUNNELLON	State Zip Code FL 34432	Transaction ID: INC.A.70725  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional	-1	242.30

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 335 (check only one)    X
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
ب 4.	Full Name (Last, First, Middle Initial) MR NEIL PREZIOSO			Date of Receipt
	Mailing Address 10258 WINDSOR WA	Y		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70617
	POWELL FEC ID number of contributing federal political committee.	C	43065	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP HLTH	n H CARE OPS/FORMULARY/	/CDP
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
_ 3.	Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE			Date of Receipt
	Mailing Address 875 ALEXANDRIA CT			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70564
	RAMSEY  FEC ID number of contributing federal political committee.	C	07446	Amount of Each Receipt this Period  192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP HR	n	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 4230.60	
_ ;.	Full Name (Last, First, Middle Initial) MR ROBERT PRITCHET			Date of Receipt
	Mailing Address 135 HOLLYBERRY DF	RIVE		10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.70683  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR (	n CONTRACT ADMINISTRATI	 ION
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	]
	SUBTOTAL of Receipts This Page (optional)			267.30

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
<b>A</b> .	Full Name (Last, First, Middle Initial) MR MARK PROULX			Date of Receipt
	Mailing Address 20 BRANDY RIDGE R			10 10 2009
	City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.70765  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0.01	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP PH	n ARMACY & CUST SVC OPS	<del>-</del>   ;
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4230.82	
— В.	Full Name (Last, First, Middle Initial) SYED QUADRI			Date of Receipt
	Mailing Address 6040 KENNEDY BLVD APT 30N	EAST		10 10 2009
	City WEST NEW YORK	State	Zip Code	Transaction ID: INC.A.70756
	WEST NEW YORK  FEC ID number of contributing federal political committee.	C	07093	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRI		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
— C.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
	Mailing Address 800 SANDY TRAIL			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.70790
	KELLER FEC ID number of contributing federal political committee.	C	76248	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR HR	n	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1100.00	
S	SUBTOTAL of Receipts This Page (optional)			242.31
	OTAL This Period (last page this line number		·	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 335 (check only one)    X   11a
or for commercial purposes, other than u	is and Statements may not be sold or used by any person sing the name and address of any political committee to INC. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS FRANCES RAO Mailing Address 19 ROSS ROAD  City SCARSDALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10583  C  Occupation EXEC DIR REGULATORY  Aggregate Year-to-Date ▼  1650.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MRS DOLORES RAPUANO Mailing Address 57660 BEAVER  City QUAKER CITY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	VALLEY RD  State Zip Code OH 43773  C  Occupation SR DIR ELIGIBILITY  Aggregate Year-to-Date ▼  550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MRS MONICA REED Mailing Address 8475 DUNHAM  City TAMPA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	STATION DRIVE  State Zip Code FL 33647  C  Occupation VP PROF PRA  Aggregate Year-to-Date  975.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (opt	ional)	150.00

SCHEDULE A (FEC For	m 3X)  Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
or for commercial purposes, other that NAME OF COMMITTEE (In Full)	oorts and Statements may not be sold or used by any person using the name and address of any political committee to NS INC. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initi MR THOMAS REINCKENS  Mailing Address 204 TOKENE	KE RD	Date of Receipt  10 10 2009
City DARIEN	State Zip Code CT 06820	Transaction ID: INC.A.70481  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BIAC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initi MR VICTOR RENNA Mailing Address 8 CARLA AN	<u></u>	Date of Receipt
- OANEA AN		10 10 2009
City	State Zip Code	Transaction ID: INC.A.70728
FLANDERS  FEC ID number of contributing federal political committee.	NJ 07836	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROCUREMENT & INVENTORY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initi	al)	Date of Receipt
Mailing Address 412 RIVER M	MEWS LANE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.70787
EDGEWATER	NJ 07020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1540.00	
SURTOTAL of Receipts This Page	(optional)	170.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal he name and address of any political committee to .  POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) SUZANNE RICHARDS  Mailing Address 21357 W 115TH TEI  City OLATHE  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General	R  State Zip Code KS 66061  C  Occupation NATL ACCT MGR PHARM MANUFA  Aggregate Year-to-Date ▼  550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR DAVID ROBARGE Mailing Address 4565 QUEENSLAND  City MINNEAPOLIS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	0 0 0 0 0 0 0 0	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS TRACEY RODGERS-LENGE Mailing Address 19 FARMINGTON C  City RAMSEY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		75.00

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS SORAYA RODRIGUEZ-BALZAC			Date of Receipt
Mailing Address 22 PAPOOSE TRA	AIL.		10 10 2009
City ANDOVER	State NJ	Zip Code 07821	Transaction ID: INC.A.70786  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PUB	n LIC AFFAIRS	
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO			Date of Receipt
Mailing Address 855 CLUB MOSS (	CT.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MARIETTA	State GA	Zip Code 30068	Transaction ID: INC.A.70479  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRESIDE	n ENT SYSTEMED	
Receipt For:  Primary General  Other (specify) ▼	- <del>                                    </del>	Year-to-Date ▼ 4230.60	
Full Name (Last, First, Middle Initial) DAVID ROOT			Date of Receipt
Mailing Address 212 SPRING BRAN	NCH ROAD		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City WAVERLY	State VA	Zip Code 23890	Transaction ID: INC.A.70864  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	23030	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR STA	TE GOVERNMENT AFFAIR	5
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (options	al)		242.30

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than using t	Statements may not be sold or used by any penter name and address of any political committee.  POLITICAL ACTION COMMITTEE (a.l.)	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS DONNA ROSEN  Mailing Address 7 RED OAK LANE  City KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07405  C  Occupation VP OPS-CLINICAL TECH Aggregate Year-to-Date   1100.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) DR CHRISTINE ROTTAS Mailing Address 7227 RAMOTH DRIV  City JACKSONVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code FL 32226  C  Occupation EXEC DIR CLINICAL SVCS  Aggregate Year-to-Date ▼  1100.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR RICHARD RUBINO Mailing Address 3 APACHE DRIVE  City OAKLAND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07436  C  Occupation SVP FINANCE & CHIEF FIN OFFO Aggregate Year-to-Date  4246.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		293.00

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 335 (check only one)    X
or for commercial purposes  NAME OF COMMITTEE	, other than using the name and E (In Full)	may not be sold or used by any personal address of any political committee to the solution of	on for the purpose of soliciting contributions o solicit contributions from such committee.  a. Medco Health PAC)
Full Name (Last, First, NMR STEVEN RUSSEK Mailing Address 21 S  City OAKLAND  FEC ID number of contrederal political committee  Name of Employer ACCREDO HEALTH G  Receipt For: Primary Other (specify)	State NJ Sbuting See.  C  Occupa VP CL	07436	Date of Receipt  10 10 2009  Transaction ID: INC.A.70501  Amount of Each Receipt this Period  50.00
Full Name (Last, First, MMS KATHERYN RUSS) Mailing Address 5965  City JOHNSTON  FEC ID number of contrederal political committee  Name of Employer MEDCO HEALTH SOL	State IA	Zip Code 50131	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, MMR ANTHONY RUSSO) Mailing Address 66 F  City RINGWOOD  FEC ID number of contr federal political committee  Name of Employer MEDCO HEALTH SOL	INCH RD  State NJ Sibuting ie.  UTIONS  Occupa	07456	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	his Page (optional)		150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal statements may not be sold or used by any personal statement and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JESSE RUZICKA Mailing Address 334 MORRIS AVE  City BOONTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07005  C  Occupation NATL ACCT EXEC  Aggregate Year-to-Date   660.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial)  MS MARY RYAN  Mailing Address 456 RICHMOND AV  City  MAPLEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code NJ 07040  C  Occupation VP PHARMACY REGULATORY  Aggregate Year-to-Date   1723.48	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MRS CYNTHEA RYDER Mailing Address 74 CHOCTAW TRA  City RINGWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07456  C  Occupation DIR E-COM STRAT & DELIV  Aggregate Year-to-Date  700.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	<b>)</b>	358.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 335 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MISS CYNTHIA RYLANDS			Date of Receipt
Mailing Address 4836 MIDDLE RD			10 10 2009
City	State	Zip Code	Transaction ID: INC.A.70708
ALLISON PARK	PA	15101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR BUS	n SINESS REQUIREMENTS	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		550.00	
Full Name (Last, First, Middle Initial) MR RYAN SADLER			Date of Receipt
Mailing Address 85 VANCE ST. #201			10 10 2009
City	State	Zip Code	Transaction ID: INC.A.70872
MEMPHIS	TN	38103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR GO\	n /ERNMENT AFFAIRS	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR MICHAEL SARDONE			Date of Receipt
Mailing Address 7 AHERN WAY			10 / 10 / 2009
City	State	Zip Code	Transaction ID: INC.A.70536
WEST ORANGE	NJ	07052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n ENTERPRISE BUS INTELLIO	□ G
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		550.00	
SUBTOTAL of Receipts This Page (optional) .			75.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 122 / 335   (check only one)     X				
Any information copied from such Reports or for commercial purposes, other than us	s and Statements may not be sold or used by any pring the name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	INC. POLITICAL ACTION COMMITTEE (a.	k.a. Medco Health PAC)				
Full Name (Last, First, Middle Initial) MR MATTHEW SARDY						
MR MATTHEW SARDY  Mailing Address 230 FAIRFIELD	Mailing Address 230 FAIRFIELD AVE.					
City RIDGEWOOD	State Zip Code NJ 07450	Transaction ID: INC.A.70419  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE					
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼  750.00					
Full Name (Last, First, Middle Initial) MS BETH SAVARE	I	Date of Receipt				
Mailing Address 27 JONES LN	M M / D D / Y Y Y Y Y 1 1 0 1 0 1 0 2 0 0 9					
City BLAIRSTOWN	State Zip Code NJ 07825	Transaction ID: INC.A.70677				
FEC ID number of contributing federal political committee.	NJ 07825	Amount of Each Receipt this Period  25.00				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARM OPS					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  550.00					
Full Name (Last, First, Middle Initial) MR DAVID SCHLETT		Date of Receipt				
Mailing Address 339 GRAMERCY	Y PL	M M / D D / Y Y Y Y Y 1 1 0 1 1 0 2 0 0 9				
City GLEN ROCK	State Zip Code NJ 07452	Transaction ID: INC.A.70679				
FEC ID number of contributing federal political committee.	NJ 07452	Amount of Each Receipt this Period 50.00				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANCIAL & ANALYTICAL	SVC				
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼  1100.00					
SURTOTAL of Receipts This Page (opti-	onal)	125.00				

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17	
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to c. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ Mailing Address 9111 N KARLOV  City SKOKIE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code IL 60076  C  Occupation EXEC DIR CLINICAL SVCS  Aggregate Year-to-Date   1100.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) BRUCE SCOTT  Mailing Address 18650 BEARPATH  City EDEN PRAIRIE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code MN 55347  C  Occupation SVP & CHIEF PHARMACIST  Aggregate Year-to-Date ▼  4230.82	Date of Receipt  M M J D D D Z D O D  Transaction ID: INC.A.70887  Amount of Each Receipt this Period  192.31	
Full Name (Last, First, Middle Initial)  MS CYNTHIA SCOTT  Mailing Address 18650 BEARPATH  City  EDEN PRAIRIE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code MN 55437  C  Occupation VP CLINICAL PROG DEV  Aggregate Year-to-Date   1100.00	Date of Receipt  M M J D D J Z D D J Z D D D D D D D D D D D	
SUBTOTAL of Receipts This Page (optional	)	292.31	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT Mailing Address 7330 EVEREST LANI City MAPLE GROVE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State MN  C  Occupation SR NATL	Zip Code 55311  1 ACCT EXEC  Year-to-Date ▼  1100.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼  Full Name (Last, First, Middle Initial) MS MONICA SCOZZARE  Mailing Address 3021 E MILLCREEK I  City  SALT LAKE CITY  FEC ID number of contributing federal political committee.	ROAD State UT	Zip Code 84109	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		n R CLINICAL SVCS Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MR ROBERT SENDEWICZ Mailing Address 1220 CROSSING WA	AY	Zip Code	Date of Receipt  10 10 2009  Transaction ID: INC.A.70375
WAYNE FEC ID number of contributing federal political committee.	NJ C	07470	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		TECHNOLOGY Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional) .	1		125.00

SCHEDULE A (FEC Form STEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 335 (check only one)    X				
Any information copied from such Reports or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so					
MEDCO HEALTH SOLUTIONS I	NC. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)				
Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV		Date of Receipt				
	Mailing Address 66 PROSPECT AVE					
City WESTWOOD	State Zip Code NJ 07675	Transaction ID: INC.A.70753  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS DEV					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00					
Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CF						
	City State Zip Code					
LAS VEGAS	NV 89148	Transaction ID: INC.A.70588  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	60.00				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2640.00					
Full Name (Last, First, Middle Initial) MR ROBERT SHANNON						
Mailing Address 59 DANNER AVE						
City HARRISON	State Zip Code NY 10528	Transaction ID: INC.A.70685  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00					
SUBTOTAL of Receipts This Page (option	onal)	135.00				
TOTAL This Period (last page this line n	umber only)					

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 126 / 335 (check only one)    X
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions		
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MR JOHN SHEA			Date of Receipt
	Mailing Address 62 FRANKLIN TURNI	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70351
	ALLENDALE	NJ	07401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST Co	on OUNSEL	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		880.00	
- 3.	Full Name (Last, First, Middle Initial) MR FRANK SHEEHY	Date of Receipt		
	Mailing Address 119 HAMILTON RD	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70429
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			192.00
	Name of Employer MEDCO HEALTH SOLUTIONS		SENERAL MGR	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	
	Other (specify)	0 0	2768.00	
	Full Name (Last, First, Middle Initial) MR PETER SHERMAN	Date of Receipt		
	Mailing Address 139 GATES AVENUE	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70322
	MONTCLAIR	NJ	07042	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
			ING COUNSEL	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Primary General Other (specify) ▼		1100.00	
Γ	SUBTOTAL of Receipts This Page (optional).	1		282.00

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for comme	on copied from such Reports and St rcial purposes, other than using the COMMITTEE (In Full) HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.  a. Medco Health PAC)
MR JAMES Mailing Ac City NORTH FEC ID nu federal poi	ARLINGTON  umber of contributing litical committee.  Employer O HEALTH GROUP  or:	State NJ C Occupatio DIR PRIO	CING e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name MR ELWO Mailing Ac  City LONG B  FEC ID nu federal poi	er (specify)   (c) (Last, First, Middle Initial) (doctorial) (doct	State CA C Occupation		Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name JEFFREY Mailing Ac	e (Last, First, Middle Initial)	COURT	e Year-to-Date ▼ 550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of EMEDCO H	umber of contributing litical committee. Employer HEALTH SOLUTIONS or:		Zip Code 32128  n P COMMUNICATIONS 2 Year-to-Date ▼ 4230.82	Transaction ID: INC.A.70555  Amount of Each Receipt this Period  192.31
SUBTOTAL	of Receipts This Page (optional)			242.31

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 335 (check only one)    X
or for	nformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full)	o solicit contributions from such committee.		
\rightarrow N	IEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	i. Medco Health PAC)
. <u>M</u>	ull Name (Last, First, Middle Initial) R LEE SIMON			Date of Receipt
M	ailing Address 2390 GREENVIEW RC	10 10 7 2009		
Ci		State	Zip Code	Transaction ID: INC.A.70736
FE	ORTHBROOK  EC ID number of contributing deral political committee.	C	60062	Amount of Each Receipt this Period 50.00
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio GENERA	n AL MGR GROUP	7
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
B. <u>M</u>	ull Name (Last, First, Middle Initial) R JEFFREY SINKO	Date of Receipt		
IVI	ailing Address 10 CHERRY TREE LAI	10 10 2009		
Ci	•		Zip Code	Transaction ID: INC.A.70601
FE	INNELON  EC ID number of contributing deral political committee.	NJ C	07405	Amount of Each Receipt this Period  50.00
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupation ASST G	n ENERAL COUNSEL	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	]
	ull Name (Last, First, Middle Initial) R WILLIAM SIRICO	Date of Receipt		
М	ailing Address 564 DALE COURT EAS	ST		10 10 2009
Ci R	ity IVER VALE	State NJ	Zip Code 07675	Transaction ID: INC.A.70374  Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	С		30.00
N; M	Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR TECHNOLOGY			7
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 660.00	
	STOTAL of Receipts This Page (optional)			130.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11			
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person ng the name and address of any political committee to sold.	n for the purpose of soliciting contributions solicit contributions from such committee.			
Full Name (Last, First, Middle Initial) MR JOHN SISTO Mailing Address 24 MAYBERRY L  City MECHANICSBURG FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code PA 17050  C Occupation	Date of Receipt  M M J J D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Receipt For:  Primary General  Other (specify) ▼	SR DIR PHARMACY REGULATORY  Aggregate Year-to-Date ▼  550.00				
Full Name (Last, First, Middle Initial) MR DAVID SITVER Mailing Address 24 YORKSHIRE A					
City	City State Zip Code				
SUFFERN	NY 10901	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  550.00				
Full Name (Last, First, Middle Initial)	•	Date of Receipt			
. ANN SMITH Mailing Address 437 GLENDALE F	RD	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State Zip Code	Transaction ID: INC.A.70534			
WYCKOFF  FEC ID number of contributing federal political committee.	NJ 07481	Amount of Each Receipt this Period  25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PUBLIC AFFAIRS				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00				
SUBTOTAL of Receipts This Page (option	nal)	75.00			
TOTAL This Period (last page this line nu	mber only)				

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 130 / 335   (check only one)			
Any information copied from such Reports ar or for commercial purposes, other than using	ny information copied from such Reports and Statements may not be sold or used by any person for commercial purposes, other than using the name and address of any political committee to s					
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Full Name (Last, First, Middle Initial) MR ROBERT SMITH						
Mailing Address 40 JOSHUA DR						
City RAMSEY	State NJ	Zip Code	Transaction ID: INC.A.70705			
FEC ID number of contributing federal political committee.	C	07446	Amount of Each Receipt this Period  50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	1				
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 2768.00				
Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR			Date of Receipt			
Mailing Address 23 CEDAR GATE F	M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y					
City DARIEN	State CT	Zip Code 06820	Transaction ID: INC.A.70774  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.		00020	192.31			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	AN & CEO				
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 4230.82				
Full Name (Last, First, Middle Initial) MR ALAN SOKALER			Date of Receipt			
Mailing Address 30 MICHELLE WA	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State NJ	Zip Code	Transaction ID: INC.A.70811			
PINE BROOK  FEC ID number of contributing federal political committee.	C	07058	Amount of Each Receipt this Period  50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL					
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00				
			292.31			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions a solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) BARRY SOUTHERN Mailing Addrson (1970) MIDDLE FULL DV MI	A\/		Date of Receipt
	Mailing Address 3705 MIDDLEBURY W  City	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70911		
	GREENSBORO	State NC	Zip Code 27410	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio MGR PH	n IARMACY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE Mailing Address 6108 HUNTER LANE	Date of Receipt		
		10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70619
	COLLEYVILLE  FEC ID number of contributing federal political committee.	C	76034	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
С.	Full Name (Last, First, Middle Initial) BRENDA STAFFORD			Date of Receipt
	Mailing Address 647 BERKELEY AVEN	10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC.A.70889
	ORANGE FEC ID number of contributing federal political committee.	NJ C	07050	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST CO		
	Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 575.00	
	SUBTOTAL of Receipts This Page (optional)		<b>)</b>	75.00
	TOTAL This Period (last page this line number of		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any persor dress of any political committee to	for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR RALPH STAIANO Mailing Address 1 LAMBROS DRIVE			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MONROE	State NY	Zip Code 10950	Transaction ID: INC.A.70340 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		BUSINESS REQUIREMENTS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) PETER STARK			Date of Receipt
	Mailing Address 4840 COLE ROAD	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70939
	MEMPHIS  FEC ID number of contributing federal political committee.	C	38117	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio GROUP	n VP MANUF SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date  1100.00	
C.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN  Mailing Address 7 FOREST LAKE DR			Date of Receipt
	City	State	Zip Code	Transaction ID: INC.A.70681
	WEST HARRISON  FEC ID number of contributing federal political committee.	C	10604	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP FIN	n ANCIAL & ANALYTICAL SVO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4230.82	
	SUBTOTAL of Receipts This Page (optional)		·····	267.31
	TOTAL This Period (last page this line number	only)	<b>&gt;</b>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) CHANNING STAVE  Mailing Address 77 HIGHVIFW AVF			Date of Receipt
	Mailing Address 77 HIGHVIEW AVE			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70862
	TUCKAHOE  FEC ID number of contributing federal political committee.	C	10707	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n MARKETING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
— В.	Full Name (Last, First, Middle Initial) MS JILL STEARNS	1		Date of Receipt
	Mailing Address 13130 HALSELL DR	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70739
	AUSTIN	TX	78732	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	n L ACCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	1100.00	
С. С.	Full Name (Last, First, Middle Initial) MR CRAIG STEEL			Date of Receipt
	Mailing Address 122 DEMAREST AVE	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70469
	EMERSON	NJ	07630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	on L ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 700.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
r	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS AMY STEINKELLNER Mailing Address 1740 HIGHLAND DRI	VE		Date of Receipt
				10 10 2009
	City ELM GROVE	State WI	Zip Code 53122	Transaction ID: INC.A.70517
	FEC ID number of contributing federal political committee.	C	00122	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATI	on IONAL PRACTICE LEADER	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
Б.	Full Name (Last, First, Middle Initial) DR GLEN STETTIN	<u> </u>		Date of Receipt
	Mailing Address 8 MILL GLEN CT			10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70758
	UPPER SADDLE RIVER  FEC ID number of contributing federal political committee.	NJ C	07458	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/GM	on I ADVANCED CLINICAL SLT	 NS
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4230.82	
с. С.	Full Name (Last, First, Middle Initial) MR GERARD STOCKER, JR			Date of Receipt
	Mailing Address 80 ALGONQUIN TRL			10 10 2009
	City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.70470  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	on L ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			292.31
ļ	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	o solicit contributions from such committee.
/	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS JANNA STOUL Mailing Address 4 APACHE WAY			Date of Receipt
	City	State	Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70361
	MONTVILLE	NJ	07045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR T	TECHNOLOGY	
	Receipt For:  Primary  General  Other (specify)	. '	Year-to-Date ▼ 550.00	
– В.	Full Name (Last, First, Middle Initial) MR SCOTT STRATTON Mailing Address 351 TIMBERLANE DR	IVE		Date of Receipt
		10 10 2009		
	City ORANGE	State CT	Zip Code 06477	Transaction ID: INC.A.70819
	FEC ID number of contributing federal political committee.	C	00477	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROI	DUCT DEVELOPMENT	
	Receipt For:  Primary  General  Other (specify)	Aggregate	Year-to-Date ▼ 1100.00	
_ С.	Full Name (Last, First, Middle Initial) MS SUZANNE STREDNAK	<u> </u>		Date of Receipt
<b>.</b>	Mailing Address 157 WATCHUNG DR			M M / D D / Y Y Y Y Y 1 Y 1 1 0 1 0 0 2 0 0 9
	City	State	Zip Code	Transaction ID: INC.A.70415
	HAWTHORNE FEC ID number of contributing federal political committee.	NJ	07506	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 0	n CLINICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
T	TOTAL This Period (last page this line number	only)		

FOR LINE NUMBER: PAGE 136 / 335 (check only one)    X
for the purpose of soliciting contributions solicit contributions from such committee.
Medco Health PAC)
Date of Receipt
10 10 2009
Transaction ID: INC.A.70405
Amount of Each Receipt this Period
25.00
Date of Receipt
10 10 2009
Transaction ID: INC.A.70886
Amount of Each Receipt this Period
30.00
Date of Receipt
10 10 2009
Transaction ID: INC.A.70737
Amount of Each Receipt this Period
25.00
80.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 335 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MARK SULLIVAN			Date of Receipt
Mailing Address 16025 PINE VALE PL.			10 10 2009
City <u>MIDLOTHIAN</u>	State VA	Zip Code 23113	Transaction ID: INC.A.70348  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2010	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio BUSINE:	n SS PROCESS SPECIALIST	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 930.00	
Full Name (Last, First, Middle Initial) MR FREDERICK SUMNER			Date of Receipt
Mailing Address 808 HOLLYWOOD AV	ENUE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.70424
HO-HO-KUS  FEC ID number of contributing federal political committee.	NJ C	07423	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n DJECT MGMT	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MS IRENE SUTTON			Date of Receipt
Mailing Address 20 AVENUE @ PORT   APT 209	IMPERIAL		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC.A.70433  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 880.00	
SUBTOTAL of Receipts This Page (optional)			115.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 138 / 335   (check only one)			
Any information copied from suc or for commercial purposes, oth	ch Reports and Statements may er than using the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In MEDCO HEALTH SOLU	,	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Full Name (Last, First, Middl MR TIMOTHY SWETT	e Initial)		Date of Receipt			
	Mailing Address 8362 GOLDEN PRAIRIE DRIVE					
City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.70478  Amount of Each Receipt this Period			
FEC ID number of contributi federal political committee.		00077	50.00			
Name of Employer MEDCO HEALTH SOLUTION	Occupation VP/GM	n				
Receipt For:  Primary Gene Other (specify) ▼	Aggregate	Year-to-Date ▼ 2200.00				
Full Name (Last, First, Middl MR NICHOLAS TAYLOR	e Initial)		Date of Receipt			
Mailing Address 4241 Ch	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City UPPER ARLINGTON	State OH	Zip Code 43220	Transaction ID: INC.A.70766  Amount of Each Receipt this Period			
FEC ID number of contributi federal political committee.		TOLLO	25.00			
Name of Employer MEDCO HEALTH SOLUTION	Occupation DIR CLIN	n NICAL SVCS				
Receipt For:  Primary Gene  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00				
Full Name (Last, First, Middl MR BOOBALAN THANGAVEL			Date of Receipt			
Mailing Address 13 BIRC			M M / D D / Y Y Y Y Y Y 1 1 0 1 1 0 2 0 0 9			
City	State NJ	Zip Code	Transaction ID: INC.A.70796			
MT ARLINGTON  FEC ID number of contributi federal political committee.		07856	Amount of Each Receipt this Period  25.00			
Name of Employer MEDCO HEALTH SOLUTION	Occupation TECHNIC	n CAL SPECIALIST				
Receipt For:  Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00				
SUBTOTAL of Receipts This I	Page (optional)		100.00			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 139 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
_	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS MELINDA THIEL			Date of Receipt
	Mailing Address 27 GARVEY ROAD			10 10 2009
	City WAYNE	State NJ	Zip Code 07470	Transaction ID: INC.A.70442  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n PRODUCT MGMT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- В.	Full Name (Last, First, Middle Initial) MS MELISSA THOMET			Date of Receipt
	Mailing Address 721 HINMAN AVE #1E			10 10 2009
	City EVANSTON	State IL	Zip Code 60202	Transaction ID: INC.A.70356
	FEC ID number of contributing federal political committee.	C	00202	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n ACCT MGMT OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	]
с. С.	Full Name (Last, First, Middle Initial) MS MARY THORSBY			Date of Receipt
	Mailing Address 17326 ELLEN DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City LIVONIA	State MI	Zip Code 48152	Transaction ID: INC.A.70496  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	n L ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1650.00	
	SUBTOTAL of Receipts This Page (optional)	1		125.00
f	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 140 / 335   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persol lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) DREW THRAEN			Date of Receipt
Mailing Address 63 STILES AVE	10 10 2009		
City	State	Zip Code	Transaction ID: INC.A.70855
MORRIS PLAINS  FEC ID number of contributing federal political committee.	NJ C	07950	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN			Date of Receipt
Mailing Address 838 COLONIAL RD	10 10 / 2009		
City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.70363
FEC ID number of contributing federal political committee.	C	07417	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BENE	FIT SYSTEMS SUPPORT	
Receipt For:  Primary  General  Other (specify)	- '	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MR DAVID TRICE			Date of Receipt
Mailing Address 150 BRADFORD D	M M / D D / Y Y Y Y 1 1 1 0 1 0 0 9		
City	State	Zip Code	Transaction ID: INC.A.70316
SCHWENKSVILLE  FEC ID number of contributing federal political committee.	C	19473	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	CAL SPECIALIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optiona	l)		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	
1 1	. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER  Meiling Address 710 INDIAN OFFE(	DD.	Date of Receipt
Mailing Address 713 INDIAN CREEK  City	State Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70595
AMHERST	VA 24521	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR GOVERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2245.00	
Full Name (Last, First, Middle Initial) MR GARY TULLY		Date of Receipt
Mailing Address 16 FIELDHEDGE DF	10 10 2009	
City	State Zip Code	Transaction ID: INC.A.70745
HILLSBOROUGH	NJ 08844	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIENT SVC DELIVERY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	1
Full Name (Last, First, Middle Initial)		
MR JEFFREY TYLER  Mailing Address 37 KNOLL TERRAC	E	Date of Receipt  1 0 1 0 2 0 0 9
City HAZLET	State Zip Code NJ 07730	Transaction ID: INC.A.70549  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.77
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 676.94	
SUBTOTAL of Receipts This Page (optional)	·	120.77

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 142 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
C	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR KEITH URICH	• • •		Date of Receipt
	Mailing Address 12495 SOUTH 1745 E	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70521
	DRAPER	UT	84020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGION	on JAL VP SALES-SYSTEMED	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
— В.	Full Name (Last, First, Middle Initial) MRS JENNIFER UTTERDYKE			Date of Receipt
	Mailing Address 1881 GREENTREE RO	10 10 2009		
	City	State	Zip Code	Transaction ID: INC.A.70449
	<u>LEBANON</u>	OH	45036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		ARM PRACTICE	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify)	0 0	600.00	
_ c.	Full Name (Last, First, Middle Initial) MS CARA VAN ZILE			Date of Receipt
	Mailing Address 31 LINCOLN RD			10 10 2009
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.70490
	FEC ID number of contributing federal political committee.	C	07403	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	on IR ANALYTICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA			Date of Receipt
	Mailing Address W328 S4230 SPRING	RIDGE		10 10 2009
	City WAUKESHA	State WI	Zip Code 53189	Transaction ID: INC.A.70906  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n BENERAL MGR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2476.00	
В.	Full Name (Last, First, Middle Initial) MRS JEANNINE VANKLEECK	<u> </u>		Date of Receipt
	Mailing Address 56 ZIMMER AVENUE			10 10 2009
	City MIDLAND PARK	State <b>NJ</b>	Zip Code	Transaction ID: INC.A.70384
	FEC ID number of contributing federal political committee.	C	07432	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA	n ANCIAL APPLICATIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
с. С.	Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS			Date of Receipt
	Mailing Address 105 ARRANDALE RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City ROCKVILLE CENTRE	State NY	Zip Code 11570	Transaction ID: INC.A.70586  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKT		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional) .			267.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any in the name and address of any political committee.	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR WIL VELARDE Mailing Address 443 WEST SADDLE	`	Date of Receipt  10 10 2009
City <u>UPPER SADDLE RIVER</u> FEC ID number of contributing	State Zip Code NJ 07458	Transaction ID: INC.A.70431  Amount of Each Receipt this Period  30.00
Receipt For:  Primary  Other (specify)	Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date   660.00	
Full Name (Last, First, Middle Initial) MR JEFFREY VERNICE Mailing Address 201 WATCHUNG A UNIT #17		Date of Receipt  10 10 2009
City <u>BLOOMFIELD</u>	State Zip Code NJ 07003	Transaction ID: INC.A.70427  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MEDICAL	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR GORDON VICKERS		Date of Receipt
Mailing Address 436 MOUNTAIN AV	ENUE	10 10 / Y Y Y Y Y Y
City WESTFIELD	State Zip Code NJ 07090	Transaction ID: INC.A.70319  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional	)	80.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 335 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	atements may not be sold or used by any personame and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MUNISH VIJ Mailing Address 11 BOULDER TRAIL  City MAHWAH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 07430  C  Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date   550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR STEVEN VREELAND Mailing Address 19 ANNA STREET  City DENVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07834  C  Occupation DIR TECHNOLOGY	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) MS ANNETTE WAGNER Mailing Address 8 INDIAN RUN ROAD  City LONG VALLEY  FEC ID number of contributing federal political committee.	Aggregate Year-to-Date ▼  550.00  State Zip Code NJ 07853  C	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date ▼  550.00	
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		75.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 146 / 335   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR DANIEL WALDEN			Date of Receipt
Mailing Address 450 BEECHMONT	DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NEW ROCHELLE	State NY	Zip Code 10804	Transaction ID: INC.A.70655  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP REC	GULATORY & MC PROGRA	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 4230.82	
Full Name (Last, First, Middle Initial) MS THERESE WALKER			Date of Receipt
Mailing Address 363 MULBERRY C	Γ		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.70337  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07401	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	PRODUCT MGMT	
Receipt For:  Primary  General  Other (specify)	<del>-   '</del>	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE			Date of Receipt
Mailing Address 5445 GOODWIN A	VENUE		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City DALLAS	State TX	Zip Code 75206	Transaction ID: INC.A.70801  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13200	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE	S SEGMENT LEADER	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 4230.82	
SUBTOTAL of Receipts This Page (optiona			409.62

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE			Date of Receipt
	Mailing Address 5 APPLE ORCHARD F			10 10 2009
	City MOORESTOWN	State NJ	Zip Code 08057	Transaction ID: INC.A.70603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 2200.00	
ь В.	Full Name (Last, First, Middle Initial) MS CATHERINE WASSON			Date of Receipt
	Mailing Address 3912 CALLE ANDALU	CIA		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70366
	SAN CLEMENTE	CA	92673	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP NATI		
	Receipt For:  Primary General  Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1100.00	
- С.	Full Name (Last, First, Middle Initial) MS BEVERLY WATSON			Date of Receipt
	Mailing Address 2 MICHELANGELO CO	OURT		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70647
	SOMERSET  FEC ID number of contributing federal political committee.	C	08873	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR BEN	n IEFIT DELIVERY SYSTEMS	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
-	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for	nformation copied from such Reports and St commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
\	AME OF COMMITTEE (In Full) EDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
<b>A.</b> <u>S</u> T	ll Name (Last, First, Middle Initial) ACY WATSON			Date of Receipt
Ma — Cit	ailing Address 10180 HERONS NEST	State	Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70953
	AKELAND	TN	38002	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	С		25.00
Na AC	ame of Employer CCREDO HEALTH GROUP	Occupation DIR MAR	n RKETING	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	
	II Name (Last, First, Middle Initial) RS KELLY WEBBER			Date of Receipt
Ma	ailing Address 107 UPPER SADDLE F	RIVER ROA	AD.	10 10 2009
Cit	ty	State	Zip Code	Transaction ID: INC.A.70575
<u>M</u>	ONTVALE	NJ	07645	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C		100.00
Na MI	ame of Employer EDCO HEALTH SOLUTIONS	Occupation VP COR		
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2200.00	
	II Name (Last, First, Middle Initial) ARK WEGRYN			Date of Receipt
Ma	ailing Address 1717 DYMOKE DRIVE			10 10 Y Y Y Y Y Y Y Y Y
Cit	•	State	Zip Code	Transaction ID: INC.A.70533
	OLLIERVILLE	TN	38017	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		25.00
	ame of Employer CCREDO HEALTH GROUP		AND PRODUCT INTEGRAT	ΓΙΦΝ
Re	eceipt For:  Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify) ▼	0 0	550.00	
SUB	TOTAL of Receipts This Page (optional)		<b>_</b>	150.00
	AL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person he name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A. LOWELL WEINER  Mailing Address 1 BURGESS COUR	Т	Date of Receipt
City	State Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70860
WESTFIELD FEC ID number of contributing	NJ 07090	Amount of Each Receipt this Period 50.00
federal political committee.	Occupation	30.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	VP CORP COMMUNICATIONS	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial)  MR TIMOTHY WENTWORTH  Mailing Address 309 WATERVIEW D	R	Date of Receipt
City	State Zip Code	1 0 1 0 2 0 0 9  Transaction ID: INC.A.70459
FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP PRES EMPLOYER GROUP	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 4230.82	
Full Name (Last, First, Middle Initial)  C. MR KENNETH WERMES		Date of Receipt
Mailing Address 26037 N WRANGLE	R RD	10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SCOTTSDALE	State Zip Code AZ 85255	Transaction ID: INC.A.70561  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1725.00	
SUBTOTAL of Receipts This Page (optional)		342.31
TOTAL This Period (last page this line number	·	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR PETER WHITE			Date of Receipt
	Mailing Address 2241 E. PINCHOT AV #17F	Έ.		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70349
	PHOENIX  FEC ID number of contributing federal political committee.	C	85016	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on ACCT MGMT OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- В.	Full Name (Last, First, Middle Initial) MRS TAMARA WHITLEY			Date of Receipt
	Mailing Address 5847 CLENDENIN AV	E		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70330
	DALLAS FEC ID number of contributing federal political committee.	C	75228	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on BUSINESS REQUIREMENT	S
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
с. С.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER WILSON			Date of Receipt
	Mailing Address 2 TIFFANY ROAD			10 10 2009
	City MORRISTOWN	State NJ	Zip Code	Transaction ID: INC.A.70530
	FEC ID number of contributing federal political committee.	C	07960	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKT		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS COLETTE WILSON Mailing Address 16608 56TH PL W  City LYNNWOOD	State WA	Zip Code 98037	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.	C	30037	25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		ACCT EXEC Year-to-Date  550.00	]
Full Name (Last, First, Middle Initial) MS BEVERLY WINKLER  Mailing Address 17 LYNWOOD RD			Date of Receipt  10 10 2009
City	State	Zip Code	Transaction ID: INC.A.70678
VERONA  FEC ID number of contributing federal political committee.	C	07044	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n DRG DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR MICHAEL WISNIEWSKI			Date of Receipt
Mailing Address 23 DRUID HILL DR			10 10 2009
City	State	Zip Code	Transaction ID: INC.A.70738
PARSIPPANY  FEC ID number of contributing federal political committee.	NJ C	07054	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CONTRACT ADMINISTRATI	10N
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
			75.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)  X 11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR STEPHEN WOGEN  Mailing Address 145 WAUGHAW RO  City  TOWACO  FEC ID number of contributing federal political committee.  Name of Employer  MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify)	State Zip Code NJ 07082  C  Occupation SVP FINANCIAL & ANALYTICAL SV Aggregate Year-to-Date	Date of Receipt  10 10 2009  Transaction ID: INC.A.70472  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH Mailing Address 43 AZALEA PLACE  City PISCATAWAY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 08854  C  Occupation SR DIR RRA  Aggregate Year-to-Date   660.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS ANNA WONG Mailing Address 64-20 BELL BLVD  City BAYSIDE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 11364  C  Occupation VP INSURED SOLUTIONS Aggregate Year-to-Date  1100.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		130.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 335 (check only one)    X
An	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Po	name and add	lress of any political committee to	o solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) MS JUDITH WOOD  Mailing Address 76 COLONIAL ROAD  City STILLWATER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS		ACCT MGMT OPS	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 3.	Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) BRENDA WRIGHT		Year-to-Date ▼ 550.00	Date of Receipt
	Mailing Address 1834 HUNTERS CREE  City  GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼	State TN C Occupation VP QUAL	Zip Code 38138  T.  LITY INTEGRITY HEALTH Year-to-Date  1100.00	Transaction ID: INC.A.70924  Amount of Each Receipt this Period  50.00
<b>-</b>	Full Name (Last, First, Middle Initial) MR SERGEY YANITSKIY  Mailing Address 793 LINCOLN AVE  City POMPTON LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07442  HNOLOGY Year-to-Date   550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)		)	100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 154 / 335   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS SARAH YINGLING			Date of Receipt
Mailing Address 901 ST MARKS AV	/E		10 10 YYYY 2009
City	State	Zip Code	Transaction ID: INC.A.70544
WESTFIELD  FEC ID number of contributing federal political committee.	C	07090	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR N	n MEDICARE OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR	l .		Date of Receipt
Mailing Address 219 SPOOK ROCk	K RD.		10 10 2009
City	State	Zip Code	Transaction ID: INC.A.70633
SUFFERN  FEC ID number of contributing federal political committee.	C	10901	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & C	n HIEF INFO OFFICER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MS JILL ZELMAN			Date of Receipt
Mailing Address 43604 EMERALD I	DUNES PL		10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LEESBURG	State VA	Zip Code 20176	Transaction ID: INC.A.70697
FEC ID number of contributing federal political committee.	C	20170	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CONSOLIDATION PLAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (options	al)		100.00

	E A (FEC Form 3X RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 155 / 335   (check only one)
Any information or for commerc	copied from such Reports and ial purposes, other than using the	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
1 \	COMMITTEE (In Full) IEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
	_ast, First, Middle Initial) HELEZNYAK			Date of Receipt
Mailing Add	ress 5 DENISE COURT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	DANI	State	Zip Code	Transaction ID: INC.A.70780
	nber of contributing cal committee.	NJ C	07726	Amount of Each Receipt this Period  25.00
Name of Em MEDCO HE	iployer EALTH SOLUTIONS	Occupation	n CAL SPECIALIST	
Receipt Formal Prima		<del> </del>	e Year-to-Date ▼ 550.00	
Full Name (I	_ast, First, Middle Initial)			Date of Receipt
	ress 6550 HERONWOOL	O DR		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City MEMPHIS	•	State TN	Zip Code 38119	Transaction ID: INC.A.70441  Amount of Each Receipt this Period
FEC ID num	nber of contributing cal committee.	C	30113	50.00
Name of Em MEDCO HE	iployer ALTH SOLUTIONS	Occupation SR NATI	n _ ACCT EXEC	
Receipt For: Primal Other			e Year-to-Date ▼ 1100.00	
Full Name (I	_ast, First, Middle Initial)			Date of Receipt
	ress 6691 DEERVIEW D	RIVE		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City LOVELAN	ID.	State OH	Zip Code	Transaction ID: INC.A.70514
FEC ID num	nber of contributing cal committee.	C	45140	Amount of Each Receipt this Period  25.00
Name of Em MEDCO HE	ployer ALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For: Prima Other			Year-to-Date ▼ 1100.00	
SUBTOTAL o	f Receipts This Page (optional)	)		100.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 156 / 335 (check only one)    X   11a
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
١.	Full Name (Last, First, Middle Initial)  MR ANTHONY ZOLFO  Mailing Address 726 HIGH MOUNTAIN	N POAD		Date of Receipt
	720 FIIGH WOON FAI	N HOAD		10 10 2009
	City	State	Zip Code	Transaction ID: INC.A.70807
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST Co	n OUNSEL	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	550.00	
	Full Name (Last, First, Middle Initial) MR TIMOTHY TIDD			Date of Receipt
	Mailing Address 989 TRACKERS GLE	N AVEUNE		10 12 2009
	City	State	Zip Code	Transaction ID: INC.A.69607
	HENDERSON	NV	89015	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1300.00
	Name of Employer LIBERTY MEDICAL		PATIENT OPERATIONS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		1300.00	
	Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO			Date of Receipt
	Mailing Address 26 DAYLILY DRIVE			10 17 2009
	City	State	Zip Code	Transaction ID: INC.A.71494
	MOUNT LAUREL	NJ	08054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	_	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	-
	Other (specify) ▼		660.00	
	UBTOTAL of Receipts This Page (optional) .			1340.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 157 / 335 (check only one)    X
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 6527 SHORBURGH [	DDIVE		Date of Receipt
	Mailing Address 6527 SHORBURGH I	10 17 2009		
	City	State	Zip Code	Transaction ID: INC.A.70978
	INDIANAPOLIS	IN	46278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n ARM PRACTICE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
_ 3.	Full Name (Last, First, Middle Initial) MR BARRY CESANEK			Date of Receipt
	Mailing Address 5 LEXINGTON CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.71218
	SHAMONG	NJ	08088	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS		ARM PRACTICE	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	
	Other (specify)		550.00	
. –	Full Name (Last, First, Middle Initial) MR JASON COLE			Date of Receipt
	Mailing Address 14917 E BELLA VISTA			10 17 2009
	City	State	Zip Code	Transaction ID: INC.A.71188
	VERADALE	WA	99037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1100.00	
г				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 158 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma le name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR KENNETH DANIELS			Date of Receipt
	Mailing Address 4156 DUNMORE DR	10 17 2009		
	City LAKE WALES	State FL	Zip Code 33859	Transaction ID: INC.A.71273  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
В.	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO Mailing Address 9 GREEN HILL TRAIL			Date of Receipt
	Maining Address 9 GREEN HILL I HAII	10 17 2009		
	City	State	Zip Code	Transaction ID: INC.A.71277
	TROPHY CLUB	TX	76262	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-, '	ONAL SERVICE CENTER	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2200.00	
C.	Full Name (Last, First, Middle Initial) MR ROBERT GIBBS	<b>'</b>		Date of Receipt
	Mailing Address 544 DENMOOR COU	10 17 2009		
	City GALLOWAY	State OH	Zip Code 43119	Transaction ID: INC.A.71037  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	on ARM PRACTICE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)		<b>)</b>	87.50
	TOTAL This Period (last page this line numbe	er only)	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	e (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and address of any political comm	y person for the purpose of soliciting contributions nittee to solicit contributions from such committee.  (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12224 MONTCALM S  City	State Zip Code	Date of Receipt  10 17 2009  Transaction ID: INC.A.71342
CARMEL  FEC ID number of contributing federal political committee.	IN 46032	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	VP/GM  Aggregate Year-to-Date ▼  1100.0	
Full Name (Last, First, Middle Initial) MR BRICE LOVE Mailing Address 2390 BRANDON RD		Date of Receipt  10 17 2009
City COLUMBUS	State Zip Code OH 43221	Transaction ID: INC.A.71193  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C +3221	12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.0	00
Full Name (Last, First, Middle Initial) MR ROSS LUCE	1	Date of Receipt
Mailing Address 1066 WEST GROVE	СТ	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GIBSONIA	State Zip Code PA 15044	Transaction ID: INC.A.71102  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1320.0	00
	ı	67.50

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for cor	mation copied from such Reports and St mmercial purposes, other than using the E OF COMMITTEE (In Full) ICO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MRS	lame (Last, First, Middle Initial) CATHY PATTEN	\!!! IF		Date of Receipt
City	g Address 2001 MEADOWS AVEI	State	Zip Code	1 0 1 7 2 0 0 9  Transaction ID: INC.A.71258
FEC I	TANA  ID number of contributing all political committee.	C	76226	Amount of Each Receipt this Period 25.00
Recei	e of Employer CO HEALTH SOLUTIONS  ipt For: Primary General Other (specify)	Occupation VP/GM Aggregate	e Year-to-Date ▼ 1100.00	]
MR P	lame (Last, First, Middle Initial) AVLOS PAVLIDIS Ig Address 2780 FOLKSTONE RO	AD		Date of Receipt
City	UMBUS	State OH	Zip Code 43220	Transaction ID: INC.A.71059  Amount of Each Receipt this Period
FEC I	ID number of contributing all political committee.	C	TOLES	25.00
Name MED	of Employer CO HEALTH SOLUTIONS	Occupation VP/GM	n	
	pt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	lame (Last, First, Middle Initial) ILBERT RAINES			Date of Receipt
Mailin	g Address 800 SANDY TRAIL			10 17 YYYY 10 17 2009
City KELI	LER	State TX	Zip Code 76248	Transaction ID: INC.A.71440  Amount of Each Receipt this Period
FEC I	ID number of contributing al political committee.	C		25.00
Name MED	of Employer CO HEALTH SOLUTIONS	Occupation DIR HR	n	
	pt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1100.00	
	TAL of Receipts This Page (optional)			75.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 335 (check only one)    X
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CREEK	΄ <b>Δ</b> \/Γ		Date of Receipt
	Walling Address 200 BROSHT CREEN	10 17 2009		
	City	State	Zip Code	Transaction ID: INC.A.71238
	LAS VEGAS	NV	89148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2640.00	
_ 3.	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE	1		Date of Receipt
	Mailing Address 6108 HUNTER LANE			10 17 2009
	City	State	Zip Code	Transaction ID: INC.A.71269
	COLLEYVILLE	TX	76034	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM		
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		1100.00	
- :.	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT	1		Date of Receipt
	Mailing Address 8362 GOLDEN PRAIL	10 17 2009		
	City	State	Zip Code	Transaction ID: INC.A.71128
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2200.00	
Γ	SUBTOTAL of Receipts This Page (optional) .	1		135.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 162 / 335   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN		• •	
Full Name (Last, First, Middle Initial) MRS JENNIFER UTTERDYKE			Date of Receipt
Mailing Address 1881 GREENTREE	EROAD		10 17 2009
City LEBANON	State OH	Zip Code 45036	Transaction ID: INC.A.71099  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	RM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE	I		Date of Receipt
Mailing Address 5 APPLE ORCHAF	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City MOORESTOWN	State NJ	Zip Code	Transaction ID: INC.A.71253
FEC ID number of contributing federal political committee.	C	08057	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2200.00	
Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI			Date of Receipt
Mailing Address 6691 DEERVIEW	DRIVE		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City LOVELAND	State OH	Zip Code 45140	Transaction ID: INC.A.71164
FEC ID number of contributing federal political committee.	C	45140	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	١	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (option:	al)		125.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 335 (check only one)    X
(	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements mand add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
2	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) RICHARD A. GRILLO			Date of Receipt
	Mailing Address 3059 SOUTHWEST W	OODLAND	TRAIL	10 21 2009
	City PALM CITY	State FL	Zip Code 34990	Transaction ID: INC.A.69624  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	Name of Employer LIBERTY MEDICAL	Occupatio VICE PR	n ESIDENT, FACILITIES MAN	IAGEMENT
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
_ В.	Full Name (Last, First, Middle Initial) MR THOMAS ABSON			Date of Receipt
	Mailing Address 57 SYCAMORE DRIVE	10 24 2009		
	City WALDWICK	State NJ	Zip Code 07463	Transaction ID: INC.A.71112  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FOF	n RMULARY & COVERAGE MO	─ GMT
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
_ C.	Full Name (Last, First, Middle Initial) MS LESLIE ACHTER			Date of Receipt
	Mailing Address 821 ALBEMARLE STR	10 24 2009		
	City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.71101
	FEC ID number of contributing federal political committee.	C	0/461	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n IR ANALYTICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			725.00
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 164 / 335 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any per the name and address of any political committee.  C. POLITICAL ACTION COMMITTEE (a.k.)	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR EDWARD ADAMCIK Mailing Address 1021 SUNSET RID	GE	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BRIDGEWATER FEC ID number of contributing federal political committee.	State Zip Code NJ 08807	Transaction ID: INC.A.71010  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary Other (specify)	Occupation VP PHARM CONTRACT & CONSU Aggregate Year-to-Date ▼ 1100.00	JLTI NG
Full Name (Last, First, Middle Initial) DIANE ADAMS Mailing Address 34 THOMAS ST.		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  CALDWELL  FEC ID number of contributing	State Zip Code NJ 07006	Transaction ID: INC.A.71483  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation SR DIR BUSINESS REQUIREMEN Aggregate Year-to-Date   550.00	NTS
Full Name (Last, First, Middle Initial) MR STEPHEN ADLER Mailing Address 139 BELLVALE LA	KES RD	Date of Receipt
City WARWICK FEC ID number of contributing	State Zip Code NY 10990	Transaction ID: INC.A.71098  Amount of Each Receipt this Period  50,00
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	30.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (options	il)	125.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 165 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) DR JODY ALLEN Mailing Address 3031 MOUNT HILL DF	<u> </u>		Date of Receipt
				10 24 2009
	City MIDLOTHIAN	State VA	Zip Code 23113	Transaction ID: INC.A.71097
	FEC ID number of contributing federal political committee.	C	23113	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIN	on IICAL POLICY-GOV AFFAIR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
В.	Full Name (Last, First, Middle Initial) MARENE ALLISON			Date of Receipt
	Mailing Address 4405 WISMER ROAD	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71477
	DOYLESTOWN FEO ID and the time	PA	18901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SEC	on URITY & ASSET PROTECTI	ON
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		1100.00	
C.	Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO			Date of Receipt
	Mailing Address 19 ROSS ROAD			10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71175
	SCARSDALE FEC ID number of contributing federal political committee.	C	10583	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	on O TECHNOLOGY	_
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
	TOTAL This Period (last page this line number	only)	·	

	FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 166 / 335 (check only one)    X
4	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) TEJWANSH ANAND			Date of Receipt
	Mailing Address 10 WHIPPOORWILL	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71436
	CHAPPAQUA	NY	10514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFC	n ) TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1100.00	
_	Full Name (Last, First, Middle Initial) MS JAYME ANTONOPLOS			Date of Receipt
	Mailing Address 48 WITTE ROAD			10 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.71272
	HEWITT	NJ	07421	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR EXE	n EC CORR	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
_	Full Name (Last, First, Middle Initial) MR DAVID ARCISZEWSKI			Date of Receipt
	Mailing Address 20 CHADWELL PLAC	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71201
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST Co		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	]
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		100.00

City SALT LAKE CITY UT 84106  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS CHARLOTTE BABCOCK Malling Address 2636 SHAKER RD  City CLEVELAND HEIGHTS OH 44118  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Amount of Each  City State Zip Code Cupation NATL ACCT EXEC Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) ERIK BAGIN Malling Address 73 HIGHLAND AVENUE  City GLEN RIDGE NJ 07028  FEC ID number of contributing federal political committee.  City GLEN RIDGE NJ 07028  FEC ID number of contributing federal political committee.  City GLEN RIDGE NJ 07028  Amount of Each  Transaction ID: Amount of Each  Aggregate Year-to-Date ▼  Transaction ID: Amount of Each  Coccupation NATL ACCT EXEC  Receipt For: Primary General  City GLEN RIDGE NJ 07028  Amount of Each  Amount of Each  Amount of Each  Amount of Each  Aggregate Year-to-Date ▼  Transaction ID: Amount of Each  Amount of Each  Aggregate Year-to-Date ▼  Primary General	R: PAGE 167/335  11c 12 15 16 11
A. Full Name (Last, First, Middle Initial)  Dennis AUCH  Mailing Address 1981 E. COVEY VIEW COURT  City State Zip Code SALT LAKE CITY  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MS CHARLOTTE BABCOCK  Mailing Address 2636 SHAKER RD  City State Zip Code OH 44118  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Amount of Each  City State Zip Code OH 44118  Carbon Dennistree  Carbon Dennistree  NATL ACCT EXEC  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) ERIK BAGIN  Mailing Address 73 HIGHLAND AVENUE  City State Zip Code NJ 07028  FULL Name (Last, First, Middle Initial) ERIK BAGIN  Mailing Address 73 HIGHLAND AVENUE  City State Zip Code NJ 07028  FEC ID number of contributing federal political committee.  City GLEN RIDGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  City State Zip Code NJ 07028  FEC ID number of contributing federal political committee.  City State Zip Code NJ 07028  FEC ID number of contributing federal political committee.  Amount of Each  Transaction D: Amount of Each  Amount of Each	om such committee.
Deter of Receipt  Mailing Address 1981 E. COVEY VIEW COURT  City  SALT LAKE CITY  State Zip Code UT 84106  Transaction ID: Amount of Each  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  MS CHARLOTTE BABCOCK  Mailing Address 2636 SHAKER RD  City  CLEVELAND HEIGHTS  OH 44118  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Aggregate Year-to-Date ▼  Transaction ID: Amount of Each  Transaction ID: Am	C) 
City State Zip Code UT 84106  FEC ID number of contributing federal political committee.  Name of Employer ACRECO HEALTH GROUP  Primary General Other (specify) ▼	
SALT LAKE CITY  SALT LAKE CITY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  City  State Zip Code  OH 44118  City  Amount of Each  City  State Zip Code  OH 44118  City  Amount of Each  City  Primary General  Other (specify) ▼  Date of Receipt  Transaction ID:  Amount of Each  Amount of Each  Date of Receipt  Amount of Each  Date of Receipt  Amount of Each  City  Aggregate Year-to-Date ▼  Transaction ID:  Amount of Each  City  Aggregate Year-to-Date ▼  Transaction ID:  Amount of Each  City  GLIN RIDGE  NJ 07028  Transaction ID:  Amount of Each  City  GLIN RIDGE  NJ 07028  Transaction ID:  Amount of Each  City  Transaction ID:  Amount of Each  City  Transaction ID:  Amount of Each  City  GLEN RIDGE  NJ 07028  Transaction ID:  Amount of Each  City  Transaction ID:  Amount of Each  Amount of Each  Transaction ID:  Amount of Each  City  Transaction ID:  Amount of Each  Date of Receipt  Transaction ID:  Amount of Each  Transaction ID:  Transaction ID:  Amount of Each  Transaction ID:  Amount of Each  Transaction ID:  Amount of Each  Transaction ID:  Transaction ID:  Amount of Each  Transaction ID:  Transaction ID:  Amount of Each  Transaction ID:  Amount of Each  Transaction ID:  Transaction ID	24 2009
FEC ID number of contributing federal political committee.  Name of Employer ACREDO HEALTH GROUP Receipt For:	
Receipt For:	Feceipt this Period 50.00
Primary	
Date of Receipt    Mailing Address    2636 SHAKER RD	
City State Zip Code Transaction ID:  CLEVELAND HEIGHTS OH 44118  Amount of Each  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  ERIK BAGIN  Mailing Address 73 HIGHLAND AVENUE  City State Zip Code Transaction ID:  GLEN RIDGE NJ 07028  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Occupation GENERAL MGR GROUP  Receipt For:  Primary General 1100.00	D / Y 'Y 'Y 'Y 'Y
CLEVELAND HEIGHTS OH 44118  Amount of Each FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) ERIK BAGIN  Mailing Address 73 HIGHLAND AVENUE  City State Zip Code GLEN RIDGE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Occupation GENERAL MGR GROUP  Aggregate Year-to-Date ▼  1100.00	24 2009
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  ERIK BAGIN  Mailing Address 73 HIGHLAND AVENUE  City State Zip Code Transaction ID:  GLEN RIDGE NJ 07028  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Occupation  GENERAL MGR GROUP  Receipt For:  Primary General Aggregate Year-to-Date ▼  1100.00	
Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  ERIK BAGIN  Mailing Address 73 HIGHLAND AVENUE  City  State Zip Code  Transaction ID:  Amount of Each  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	Receipt this Period 25.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) ERIK BAGIN Mailing Address 73 HIGHLAND AVENUE  City State Zip Code GLEN RIDGE NJ 07028  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Date of Receipt  Transaction ID:  Amount of Each  Occupation GENERAL MGR GROUP  Aggregate Year-to-Date ▼	
ERIK BAGIN  Mailing Address 73 HIGHLAND AVENUE  City State Zip Code GLEN RIDGE  NJ 07028  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Date of Receipt  Transaction ID:  Occupation GENERAL MGR GROUP  Aggregate Year-to-Date   1100.00	
City State Zip Code Transaction ID:  GLEN RIDGE NJ 07028  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  State Zip Code Transaction ID:  Occupation GENERAL MGR GROUP Aggregate Year-to-Date ▼	
City State Zip Code NJ 07028  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  State Zip Code Transaction ID:  Amount of Each  C  Occupation GENERAL MGR GROUP  Aggregate Year-to-Date ▼	24 2009
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  C  Occupation GENERAL MGR GROUP  Aggregate Year-to-Date ▼	
The federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Occupation GENERAL MGR GROUP  Aggregate Year-to-Date ▼	Receipt this Period
Receipt For:  Primary  GENERAL MGR GROUP  Aggregate Year-to-Date  1100.00	50.00
Primary General	
Other (specify) ▼	
SUBTOTAL of Receipts This Page (optional)	125.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 168 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS BECKIE BARATKO			Date of Receipt
	Mailing Address 80 N. WOODLAND S			10 24 2009
	City ENGLEWOOD	State NJ	Zip Code 07631	Transaction ID: INC.A.71361  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	POSAL UNIT	
	Receipt For:  Primary  General  Other (specify) ▼	+ +	e Year-to-Date ▼ 1100.00	
– В.	Full Name (Last, First, Middle Initial) MR THOMAS BARATTA	<b>I</b>		Date of Receipt
	Mailing Address 69 SKYLINE DR	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71282
	UPPER SADDLE RIVER  FEC ID number of contributing federal political committee.	NJ C	07458	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFC	on ) TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
- ).	Full Name (Last, First, Middle Initial) JANE BARLOW			Date of Receipt
	Mailing Address 3 AVALON COURT			M M / D D / Y Y Y Y Y Y 1 Y 1 1 D D / 2 4 2 0 0 9
	City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.71522  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MED	on ICAL POLICIES	
	Receipt For:  Primary  General  Other (specify) ▼	<del>, '</del>	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
	TOTAL This Period (last page this line number	only)	•	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
A	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
<b>/</b>	Full Name (Last, First, Middle Initial) MR MICHAEL BARONE			Date of Receipt
	Mailing Address 452 MEDWAY ROAD			10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71554
	FEC ID number of contributing federal political committee.	ОН	44143	Amount of Each Receipt this Period  192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	n EENERAL MGR	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4236.65	
_	Full Name (Last, First, Middle Initial) MR STEPHEN BARROW			Date of Receipt
	Mailing Address 7 SOUTHVIEW ROAD			10 24 2009
	City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INC.A.71362
	FEC ID number of contributing federal political committee.	C	07003	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FINA		
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 550.00	
_	Full Name (Last, First, Middle Initial) MR DAVID BAUGH			Date of Receipt
	Mailing Address 1813 ADONIS AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City HENDERSON	State NV	Zip Code 89074	Transaction ID: INC.A.71419
	FEC ID number of contributing federal political committee.	C	69074	Amount of Each Receipt this Period  58.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio MGR BE	n NEFIT DELIVERY SYSTEM:	<del>-</del> s
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1220.00	
	SUBTOTAL of Receipts This Page (optional)			275.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 170 / 335 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and addr	ress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR PETER BEGANS  Mailing Address 1605 CHARNITA CT  City	State	Zip Code	Date of Receipt  10 24 2009  Transaction ID: INC.A.71244
VIENNA FEC ID number of contributing federal political committee.	C	22182	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼		RNMENT AFFAIRS  Year-to-Date   2200.00	
Full Name (Last, First, Middle Initial) MR STEPHEN BELL Mailing Address 24 GLENWOOD ROA	AD.		Date of Receipt  1 0 2 4 2 0 0 9
City UPPER SADDLE RIVER	State NJ	Zip Code	Transaction ID: INC.A.71439
FEC ID number of contributing federal political committee.	C	07458	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAN	ICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate '	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MS FRANCINE BELLOFATTO			Date of Receipt
Mailing Address 4603 TUDOR DR			10 24 2009
City POMPTON PLAINS	State NJ	Zip Code 07444	Transaction ID: INC.A.71133  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	LINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	<del>-                                     </del>	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional) .	1		175.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 171 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for	nformation copied from such Reports and S commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any personders of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
1 \	AME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
<b>A.</b> <u>J</u> I	ull Name (Last, First, Middle Initial)  EAN BERGWALL	N/F		Date of Receipt
IVI	ailing Address 2546 HOLLYHOCK CC	)VE		10 24 2009
	ity	State	Zip Code	Transaction ID: INC.A.71602
<u>G</u>	GERMANTOWN	TN	38138	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		25.00
_	ame of Employer CCREDO HEALTH GROUP	Occupation DIR PRO	on DDUCT LINE II	
R [	eceipt For:  Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼	0 0	550.00	
	ull Name (Last, First, Middle Initial) IR DAVID BERRY			Date of Receipt
М	ailing Address 11 COBBLESTONE LA	10 24 2009		
	ity	State	Zip Code	Transaction ID: INC.A.71280
<u> </u>	AMSEY	NJ	07446	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		25.00
N M	ame of Employer IEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
R	eceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General  Other (specify) ▼	0 0	550.00	
	ull Name (Last, First, Middle Initial) IS EILEEN BIDELL			Date of Receipt
М	ailing Address 71 WASHINGTON CT.			10 24 2009
	ity OWACO	State	Zip Code	Transaction ID: INC.A.71276
	EC ID number of contributing	NJ	07082	Amount of Each Receipt this Period
	deral political committee.	C		25.00
	ame of Employer IEDCO HEALTH SOLUTIONS		PHARM OPS	
R 「	eceipt For:    Primary   General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		550.00	
SUE	BTOTAL of Receipts This Page (optional)			75.00
	TAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 172 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR FLOYD BILLINGS	NA COLIDA		Date of Receipt
	Mailing Address 4273 BROGDAN FAF	IM COURT		10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71292
	BUFORD	GA	30518	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	on CAL SPECIALIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
В.	Full Name (Last, First, Middle Initial) CALVIN BINGHAM			Date of Receipt
	Mailing Address 13702 W. 48TH ST.			10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71580
	SHAWNEE	KS	66216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	_	NICAL OPS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify)	0 0	550.00	
C.	Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO	•		Date of Receipt
	Mailing Address 26 DAYLILY DRIVE			10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71495
	MOUNT LAUREL	NJ	08054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	on	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		660.00	
	SUBTOTAL of Receipts This Page (optional) .			65.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 173 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to  POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN Mailing Address 4520 LINWOOD LAN  City DEEPHAVEN FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	, ,	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify)  Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN Mailing Address 50 NEW ENGLAND [	1100.00	Date of Receipt
City  RAMSEY  FEC ID number of contributing federal political committee.	State Zip Code NJ 07446	Transaction ID: INC.A.71234  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation VP MKTING & PRODUCT DEV  Aggregate Year-to-Date ▼  1100.00	
Full Name (Last, First, Middle Initial) KEN BODMER Mailing Address P.O. BOX 381947		Date of Receipt  10 24 2009
City  GERMANTOWN  FEC ID number of contributing federal political committee.	State Zip Code TN 38183	Transaction ID: INC.A.71326  Amount of Each Receipt this Period  192.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	Occupation SVP FINANCE  Aggregate Year-to-Date ▼  4224.00	
SUBTOTAL of Receipts This Page (optional) .	<b></b>	292.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 174 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than using t	d Statements may not be sold or used by any personal statements may not be sold or used by any personal the name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL BOGDA Mailing Address 80 LEONA CT  City LEVITTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 11756  C  Occupation DIR TECHNOLOGY  Aggregate Year-to-Date   550.00	Date of Receipt  M M M / 24
Full Name (Last, First, Middle Initial)  MRS HEATHER BONOME  Mailing Address 203 12TH STREET I  City  WASHINGTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	NE  State Zip Code DC 20002  C  Occupation DIR CLINICAL SVCS  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR JOSEPH BOTTA  Mailing Address 109 ARBOR PL  City BRYN MAWR  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code PA 19010  C  Occupation VP SALES  Aggregate Year-to-Date   550.00	Date of Receipt  M M M / 24
SUBTOTAL of Receipts This Page (optional)	)	75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 175 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F			
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX		`	Date of Receipt
Mailing Address 6527 SHORBURGH D	RIVE		10 24 2009
City	State	Zip Code	Transaction ID: INC.A.70979
INDIANAPOLIS	IN	46278	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n IRM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) RUSS BOURNE			Date of Receipt
Mailing Address 242 N HIGHLAND			10 24 2009
City	State	Zip Code	Transaction ID: INC.A.71600
MEMPHIS	TN	38111	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio VP BUS		
Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN			Date of Receipt
Mailing Address 5259 FISHERCREST I	_N		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.71370
RICHMOND	VA	23231	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FORI	n MULARY CONSULTING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4400.00	
SUBTOTAL of Receipts This Page (optional)			250.00

TOTAL This Period (last page this line number only) .....

Receipt For:  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MS HEIDI BOWMAN  Mailing Address 15 DAWN LANE  City  RINGWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Aggreg  Aggreg  C  C  Occupa	Zip Code 17036  Zip Code 17036  Zip Code 17036  Zip Code 07456	to solicit contributions from such committee.
A. Full Name (Last, First, Middle Initial) KAREN BOWE  Mailing Address 1413 LIMERICK COURT  City State HUMMELSTOWN PA  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN  Mailing Address 15 DAWN LANE  City State RINGWOOD NJ  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Occupa State Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR EITH BRADBURY  Full Name (Last, First, Middle Initial) MR KEITH BRADBURY	Zip Code 17036  tion ATL CUST RELATIONS ate Year-to-Date ▼  550.00  Zip Code 07456	Date of Receipt    M
Mailing Address 1413 LIMERICK COURT  City State HUMMELSTOWN PA  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN Mailing Address 15 DAWN LANE  City State RINGWOOD NJ  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Occupa EXEC Aggreg  MEDCO HEALTH SOLUTIONS  Receipt For: Aggreg  Full Name (Last, First, Middle Initial)  MR KEITH BRADBURY	tion ATL CUST RELATIONS ate Year-to-Date ▼  550.00  Zip Code 07456	Transaction ID: INC.A.71561  Amount of Each Receipt this Period  Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  HUMMELSTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN  Mailing Address 15 DAWN LANE  City RINGWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Occupa State Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR KEITH BRADBURY	tion ATL CUST RELATIONS ate Year-to-Date ▼  550.00  Zip Code 07456	Transaction ID: INC.A.71561  Amount of Each Receipt this Period  25.00  Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
HUMMELSTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN Mailing Address 15 DAWN LANE  City State RINGWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR KEITH BRADBURY	tion ATL CUST RELATIONS ate Year-to-Date ▼  550.00  Zip Code 07456	Date of Receipt  Date of Receipt  M M M D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)  General Other (specify)  State RINGWOOD RECEID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Cc  State RINGWOOD Aggreg  Aggreg  Primary General Occupa EXEC  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) MR KEITH BRADBURY	tion ATL CUST RELATIONS ate Year-to-Date ▼  550.00  Zip Code 07456	Date of Receipt  M M M / D D / 2 4 2 0 0 9  Transaction ID: INC.A.71415  Amount of Each Receipt this Period
Receipt For:  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MS HEIDI BOWMAN  Mailing Address 15 DAWN LANE  City  RINGWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR KEITH BRADBURY  Aggreg	ATL CUST RELATIONS ate Year-to-Date ▼  550.00  Zip Code 07456	Transaction ID: INC.A.71415  Amount of Each Receipt this Period
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN Mailing Address 15 DAWN LANE  City State RINGWOOD NJ  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR KEITH BRADBURY	Zip Code 07456	Transaction ID: INC.A.71415  Amount of Each Receipt this Period
MS HEIDI BOWMAN  Mailing Address 15 DAWN LANE  City State RINGWOOD NJ  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Aggreg  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR KEITH BRADBURY	07456	Transaction ID: INC.A.71415  Amount of Each Receipt this Period
City  RINGWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary Other (specify) ▼  Full Name (Last, First, Middle Initial) MR KEITH BRADBURY	07456	Transaction ID: INC.A.71415  Amount of Each Receipt this Period
RINGWOOD  RINGWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR KEITH BRADBURY	07456	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) MR KEITH BRADBURY		
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial) MR KEITH BRADBURY	tion	50.00
Receipt For:  Primary  Other (specify)  Full Name (Last, First, Middle Initial)  MR KEITH BRADBURY	tion	
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR KEITH BRADBURY	DIR STRAT PRODUCT MGM	<u>1T</u>
MR KEITH BRADBURY	ate Year-to-Date ▼ 1100.00	
Mailing Address 122 DERFUSS LN		Date of Receipt
		10 24 2009
City State	Zip Code	Transaction ID: INC.A.71040
BLAUVELT NY  FEC ID number of contributing federal political committee.	10913	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS EXEC	tion DIR DRUG INFO	
- · · · · · · · · · · · · · · · · · · ·	ate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)		100.00

SCHEDULE A (FEC Form	n 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 17// 335   (check only one)
Any information copied from such Report or for commercial purposes, other than	orts and Statements may using the name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTION	S INC. POLITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial  MS PATRICIA BRANUM			Date of Receipt
Mailing Address 210 FROG HO	DLLOW ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COATESVILLE	State PA	Zip Code 19320	Transaction ID: INC.A.71353
FEC ID number of contributing federal political committee.	C	19320	Amount of Each Receipt this Period  85.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	& PROCESS ENGINEERIN	 IG
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1710.00	
Full Name (Last, First, Middle Initial MR JOHN BRENNAN	)		Date of Receipt
Mailing Address 2 CARMEN LA	ANE		10 24 2009
City FLEMINGTON	State NJ	Zip Code 08822	Transaction ID: INC.A.71465  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	OCCLE TO THE PROPERTY OF THE P	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP AUDIT		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial MS LINDA BRIDGE	)		Date of Receipt
MS LINDA BRIDGE  Mailing Address 136 BEECH S	Т		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BELLEVILLE	State NJ	Zip Code 07109	Transaction ID: INC.A.71153
FEC ID number of contributing federal political committee.	C	07109	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	NT/MEMBER COMM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate '	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (c	ptional)		160.00
TOTAL This Period (last page this lin	e number only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	) <b>^</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 1/8 / 335   (check only one)     X
Any information copied from such Reports or for commercial purposes, other than usin	and Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS II	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR PAUL BRISSON			Date of Receipt
Mailing Address 469 MANOR LAN	E		10 24 2009
City PELHAM MANOR	State NY	Zip Code 10803	Transaction ID: INC.A.71144  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRC	n DDUCT DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR RICHARD BROOKLER			Date of Receipt
Mailing Address 9 ROMARY COU	RT		10 24 2009
City GLEN ROCK	State NJ	Zip Code 07452	Transaction ID: INC.A.71033  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07402	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	]
Full Name (Last, First, Middle Initial) MR KENNETH BROWN			Date of Receipt
Mailing Address 540 GIORDANO	DRIVE		10 24 2009
City YORKTOWN HEIGHTS	State NY	Zip Code 10598	Transaction ID: INC.A.71064  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENTE	n ERPRISE BUS INTELLIGEN	— C <b>€</b>
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (option	nal)		100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) STEVEN BROWN			Date of Receipt
	Mailing Address 140 S GROVE PARK  City	State	Zip Code	1 0 2 4 2 0 0 9  Transaction ID: INC.A.71582
	MEMPHIS	TN	38117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	
– В.	Full Name (Last, First, Middle Initial)  AMANDA BUNDY			Date of Receipt
	Mailing Address 5812 SEVEN POINTS	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71575
	<u>HERMITAGE</u>	TN	37076	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIM	on MBURSEMENT	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	]
_ С.	Full Name (Last, First, Middle Initial) BRIAN BURFORD			Date of Receipt
	Mailing Address 603 CHARLESWOOD	DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y 2009
	City	State	Zip Code	Transaction ID: INC.A.71574
	MARION FEC ID number of contributing federal political committee.	AR C	72364	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR TRO		
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)		<b>_</b>	100.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 180 / 335 (check only one)    X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	o solicit contributions from such committee.
<b>∠</b>	Full Name (Last, First, Middle Initial) MR KEVIN BURON Mailing Address 25 TIMBERLAND  City ALISO VIEJO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		AL MGR GROUP e Year-to-Date ▼	Date of Receipt  M M M / D D / 2 4
<b>-</b> В.	Other (specify)  Full Name (Last, First, Middle Initial) MRS DOREEN CALDER Mailing Address 441 S ELM STREET  City MAYWOOD  FEC ID number of contributing	State NJ	Zip Code 07607	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	Occupatio DIR PRO	n DDUCT DEVELOPMENT e Year-to-Date ▼ 880.00	
<b>-</b> C.	Full Name (Last, First, Middle Initial) MR GABRIEL CAPPUCCI Mailing Address 119 WASHINGTON AV  City CHATHAM  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07928	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼		on CONTROLLER e Year-to-Date ▼ 4230.82	]
	SUBTOTAL of Receipts This Page (optional)		)	282.31

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 181 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
∠ <b>4</b> .	Full Name (Last, First, Middle Initial) MR RAYMOND CARLUCCI		(4.11.4	Date of Receipt
	Mailing Address 24 SHERI DRIVE	Stata	Zin Codo	10 24 2009
	City ALLENDALE	State NJ	Zip Code 07401	Transaction ID: INC.A.71321  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		52.50
	Name of Employer ACCREDO HEALTH GROUP	Occupation GROUP	on VP MARKET STRATEGY &	DEV
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1155.00	
- 3.	Full Name (Last, First, Middle Initial) JOSEPH CASACCIA JR Mailing Address 9788 LIPSEY CV	1		Date of Receipt
	City	State	Zip Code	10 24 2009
	GERMANTOWN	TN	38139	Transaction ID: INC.A.71279  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRO	DFESSIONAL PRACTICES	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- ).	Full Name (Last, First, Middle Initial) MS MARY CASALE	1		Date of Receipt
	Mailing Address 822 CEDAR AVE			10
	City	State	Zip Code	Transaction ID: INC.A.71213
	HADDENFIELD  FEC ID number of contributing federal political committee.	C	08033	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE	on ES STRATEGY & MARKETIN	NG
	Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)	1		102.50
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 182 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS KAREN CATHCART RUSSELL			Date of Receipt
	Mailing Address 148 CLUBHOUSE DR	10 24 2009		
	City WEST COLUMBIA	State SC	Zip Code 29172	Transaction ID: INC.A.71016  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on CLINICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- В.	Full Name (Last, First, Middle Initial) MR BARRY CESANEK	I		Date of Receipt
	Mailing Address 5 LEXINGTON CT			10 24 2009
	City SHAMONG	State <b>NJ</b>	Zip Code 08088	Transaction ID: INC.A.71219  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	on ARM PRACTICE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	]
с. С.	Full Name (Last, First, Middle Initial) HWEI-CHUNG CHOU			Date of Receipt
	Mailing Address 36 TANGLEWOOD H	OLLOW		10 24 2009
	City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.71532  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	<del>, '</del>	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)			62.50
f	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 183 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
2	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR JASON COLE			Date of Receipt
	Mailing Address 14917 E BELLA VISTA	10 24 2009		
	City VERADALE	State WA	Zip Code 99037	Transaction ID: INC.A.71189  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 1100.00	
- В.	Full Name (Last, First, Middle Initial) MS SUSAN COLUCCI	<u> </u>		Date of Receipt
	Mailing Address 703 SUCCASUNNA RI	10 24 2009		
	City LANDING	State NJ	Zip Code 07850	Transaction ID: INC.A.71492
	FEC ID number of contributing federal political committee.	C	07050	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n 'H MGMT	
	Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 550.00	
_ С.	Full Name (Last, First, Middle Initial) WILLIAM CONSIDINE			Date of Receipt
C.	Mailing Address 130 WEST 67TH STRI	EET, #4J		M M / D D / Y Y Y Y Y 1 1 0 2 4 2 0 0 9
	City	State	Zip Code	Transaction ID: INC.A.71453
	NEW YORK  FEC ID number of contributing federal political committee.	C	10023	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	_
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)		<b>)</b>	75.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sched for each category on Detailed Summary	f the (Check only one)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and address of any political co	y any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.  EE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ROBERT COOK Mailing Address 270 S FRANKLIN TU  City RAMSEY FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	RNPIKE  State Zip Code NJ 07446  C  Occupation DIR HLTH CARE OPS-TEC Aggregate Year-to-Date	Date of Receipt    M M M
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) JEFFREY COOLE Mailing Address 155 ASTON HALL D	RIVE	Date of Receipt  10 24 2009
City EADS  FEC ID number of contributing federal political committee.	State Zip Code TN 38028  C	Transaction ID: INC.A.71573  Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  Other (specify) ▼	VP TAX AND REGULATOR  Aggregate Year-to-Date ▼	Y REPORT
Full Name (Last, First, Middle Initial) ANTONIO CORREIA Mailing Address 19 WILLIAMS LANE		Date of Receipt  10 24 2009
City CHAPPAQUA FEC ID number of contributing federal political committee.	State Zip Code NY 10514	Transaction ID: INC.A.71508  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP BUSINESS DEV  Aggregate Year-to-Date ▼	0.00
SUBTOTAL of Receipts This Page (optional)	,	125.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 185 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MRS BARBARA COSGRIFF			Date of Receipt
	Mailing Address 2045 MAYFAIR MCLE	10 24 2009		
	City <u>FALLS CHURCH</u>	State VA	Zip Code 22043	Transaction ID: INC.A.71549  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP PUE	n BLIC POL&EXTRNL AFFAIR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 975.00	
В.	Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN Mailing Address 25 FAIRWAY TRAIL			Date of Receipt
				10 24 2009
	City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.71176
	FEC ID number of contributing federal political committee.	C	07071	Amount of Each Receipt this Period  192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP PH	n ARMACY NETWORK MGMT	-
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 4230.82	
С.	Full Name (Last, First, Middle Initial) MR HART COVEN			Date of Receipt
	Mailing Address 28 OAK LANE			10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.71290
	MORRISTOWN  FEC ID number of contributing federal political committee.	NJ C	07960	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INFO	n TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	_	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			437.31
	TOTAL This Period (last page this line number of		·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 186 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
<b>∠</b> <b>A</b> .	Full Name (Last, First, Middle Initial) MR ROBERT CRAIG Mailing Address 7979 E SANTA CATAL  City SCOTTSDALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State AZ C Occupation EXEC D	IR PRODUCT	Date of Receipt  M M Z 4 Z 0 0 9  Transaction ID: INC.A.71158  Amount of Each Receipt this Period  60.00
_	Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate	e Year-to-Date ▼ 1320.00	]
В.	MR PETER CSUTOROS  Mailing Address 16 PLEASANT AVENU  City  LINCOLN PARK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State NJ C Occupation DIR FINA		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. _	Full Name (Last, First, Middle Initial) MR ANGELO CUOZZO  Mailing Address 19 IDA COURT  City STATEN ISLAND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 10312 on CHNOLOGY e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
-	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		<u> </u>	110.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 187 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JANET DAGLEY	Date of Receipt		
	Mailing Address 721 BROWNLEE DRI	10 24 7 2009		
	City NASHVILLE	State TN	Zip Code 37205	Transaction ID: INC.A.71601  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	37203	25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR MAI	on RKETING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) MR JOHN DALY Mailing Address 46 BLUEBELL CT	1		Date of Receipt
		10 24 2009		
	City PARAMUS	State NJ	Zip Code 07652	Transaction ID: INC.A.71337  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07002	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	]
с. С.	Full Name (Last, First, Middle Initial) MS ROSELIN DANIEL			Date of Receipt
	Mailing Address 17 DEVONSHIRE DRIVE			M M / D D / Y Y Y Y Y Y Y 1 1 0 2 4 2 0 0 9
	City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INC.A.71299  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0.000	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional) .	1		75.00
f	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 188 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR KENNETH DANIELS			Date of Receipt
Mailing Address 4156 DUNMORE DRIV	E		10 24 2009
City	State	Zip Code	Transaction ID: INC.A.71274
LAKE WALES	FL	33859	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MS MARY DASCHNER			Date of Receipt
Mailing Address 2926 EWING AVE S			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.71140
MINNEAPOLIS	MN	55416	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio GROUP	n PRES RETIREE SOLUTION	S
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4230.60	
Full Name (Last, First, Middle Initial) MR ANDREW DAVIS			Date of Receipt
Mailing Address 5616 BROOK DRIVE			10 24 2009
City	State	Zip Code	Transaction ID: INC.A.71155
EDINA	MN	55439	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MED	n ICARE CLIENT & SALES SU	IP
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	267.30

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 189 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BARRY DAVIS Mailing Address 11 WEISS DR  City TOWACO FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07082  C  Occupation SVP & GENERAL MGR  Aggregate Year-to-Date   1246.00	Date of Receipt  10 / 24 / 2009  Transaction ID: INC.A.71364  Amount of Each Receipt this Period  192.00
Full Name (Last, First, Middle Initial) WARREN DAVIS Mailing Address 3131 SADDLEGAIT  City GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General	COVE  State Zip Code TN 38138  C  Occupation DIR BUS DEV  Aggregate Year-to-Date ▼	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial)  MR DANIEL DAVISON  Mailing Address 908 STERLING DRIV  City  FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		267.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 190 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS KATHLEEN DEFABIIS Mailing Address 104 HUDSON AVE			Date of Receipt
	City	State	Zip Code	1 0 2 4 2 0 0 9  Transaction ID: INC.A.71400
	WALDWICK	NJ	07463	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CLIE	n ENT SVC DELIVERY	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS	EN OT		Date of Receipt
	Mailing Address W62 N1032 FAIRHAVI	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71245
	CEDARBURG	WI	53012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n ACCT MGMT	
	Receipt For: Primary General	Aggregate	e Year-to-Date	
	Other (specify)		550.00	
с.	Full Name (Last, First, Middle Initial) MR PAUL DELLO RUSSO			Date of Receipt
	Mailing Address 80 HILLSIDE AVENUE	<u> </u>		10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71203
	GLEN RIDGE	NJ	07028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST CO	DUNSEL	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		550.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 191 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personante name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS TONI DEMANSS  Mailing Address 32 RED BARN LAN	. POLITICAL ACTION COMMITTEE (a.k.a	Date of Receipt
City WEST MILFORD FEC ID number of contributing	State Zip Code NJ 07480	Transaction ID: INC.A.71464  Amount of Each Receipt this Period
Receipt For:  Primary  General	Occupation DIR FINANCE Aggregate Year-to-Date  550.00	25.00
Other (specify) ▼  Full Name (Last, First, Middle Initial) MS ANN-MARGARET DEMARCO  Mailing Address 1 RUGBY ROAD  City	State Zip Code	Date of Receipt  10 24 2009  Transaction ID: INC.A.71052
CEDAR GROVE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	NJ 07009  C Occupation	Amount of Each Receipt this Period  25.00
Receipt For: Primary Other (specify)	DIR FINANCE Aggregate Year-to-Date ▼  550.00	
Full Name (Last, First, Middle Initial) MS MAUREEN DEMPSEY Mailing Address 17 RICHWOOD PLA	ACE	Date of Receipt
City  DENVILLE  FEC ID number of contributing	State Zip Code NJ 07834	Transaction ID: INC.A.71485  Amount of Each Receipt this Period  25.00
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MEDICARE COMPLIANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional	)	75.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 192 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JAMES DENBY			Date of Receipt
	Mailing Address 78 SHERWOOD ST			10 24 2009
	City <u>CLIFTON</u>	State NJ	Zip Code 07013	Transaction ID: INC.A.71156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n FINANCE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
– В.	Full Name (Last, First, Middle Initial) MR JOHN DERRICO Mailing Address 195 HACKENSACK A	VENUE		Date of Receipt
	City	Zip Code	10 24 2009	
	HARRINGTON PARK	State NJ	21p Code 07640	Transaction ID: INC.A.71429  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n MARKETING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
_ С.	Full Name (Last, First, Middle Initial) MS LAURA DEVEAU	1		Date of Receipt
<b>.</b>	Mailing Address 2289 BEDFORD ST A	PT D2		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City STAMFORD	State CT	Zip Code	Transaction ID: INC.A.71235
	FEC ID number of contributing federal political committee.	C	06905	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio	n RKETING	
	Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)	1		75.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 193 / 335 (check only one)    X
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS KAREN DEZEARN			Date of Receipt
	Mailing Address 4740 BRINKLEY LANE	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71018
	ATLANTA	GA	30342	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	n L ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- В.	Full Name (Last, First, Middle Initial) ANDREW DOEDYNS			Date of Receipt
	Mailing Address 117 CREST DRIVE	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71559
	BEAVER FEC ID number of contributing federal political committee.	C	15009	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR REC	on GIONAL OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
с. С.	Full Name (Last, First, Middle Initial) MR ROBERT DOLAN			Date of Receipt
	Mailing Address 9 CRANE AVENUE			10 24 YYYY 2009
	City WEST CALDWELL	State NJ	Zip Code 07006	Transaction ID: INC.A.71302  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)	1		75.00
ļ	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 194 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS JUDITH DONNELLY Mailing Address 3 IRONWORKS ROAL	<u> </u>		Date of Receipt
	City	State	Zip Code	1 0 2 4 2 0 0 9  Transaction ID: INC.A.71397
	MONROE	NY	10950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) MS MERIDITH DORNER			Date of Receipt
	Mailing Address 8010 ORCHARD VIEW	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71041
	FOGELSVILLE	PA	18051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio NATL AC	n CCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
_	Full Name (Last, First, Middle Initial)			5
C.	MICHEL DUFRESNE  Mailing Address 58 INDEPENDENCE V	VAY		Date of Receipt  1 0 2 4 2 0 0 9
	City	State	Zip Code	Transaction ID: INC.A.71442
	MORRIS TWP	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS		ERPRISE BUS INTELLIGEN	_ C <b>E</b>
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		4230.60	
	SUBTOTAL of Receipts This Page (optional)			242.30
ŀ	TOTAL This Period (last page this line number		·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 195 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to	
` '	. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR DANA DUNCAN Mailing Address 125 COMSTOCK TF	DAII	Date of Receipt
City	State Zip Code	1 0 2 4 2 0 0 9  Transaction ID: INC.A.71224
EAST HAMPTON	CT 06424	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY		Date of Receipt
Mailing Address 2 DECKER TERRAC	10 24 2009	
City	State Zip Code	Transaction ID: INC.A.71072
KINNELON	NJ 07405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	550.00	
Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY		Date of Receipt
Mailing Address 14026 KNOX STRE	ET	10 24 2009
City OVERLAND PARK	State Zip Code KS 66221	Transaction ID: INC.A.71105
FEC ID number of contributing federal political committee.	KS 66221	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES SEGMENT LEADER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
	<u> </u>	100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 196 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR MARK DUNN			Date of Receipt
	Mailing Address 2 OLD MILL ROAD			10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71076
	SANDY HOOK	CT	06482	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 620.00	
- 3.	Full Name (Last, First, Middle Initial) MR PETER DURAN			Date of Receipt
	Mailing Address 875 HARRISTOWN R	10 24 7 9 9		
	City	State	Zip Code	Transaction ID: INC.A.71057
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRI	VACY	
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify) ▼	0 0	550.00	
. –	Full Name (Last, First, Middle Initial) DR SUMIT DUTTA			Date of Receipt
	Mailing Address 534 HUDSON STREE #3 C	T		10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71216
	NEW YORK	NY	10014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>, '</del>	ENERAL MGR	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		2269.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		252.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 197 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			n for the purpose of soliciting contributions solicit contributions from such committee.
Α.	MEDCO HEALTH SOLUTIONS INC. F  Full Name (Last, First, Middle Initial) REBECCA DYER  Mailing Address 1400 POPLAR ESTAT  City GERMANTOWN  FEC ID number of contributing federal political committee.		Zip Code 38138	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼		PERF MGMT & IMPROVEME e Year-to-Date ▼ 550.00	ENIT
В.	Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS  Mailing Address 109 KAREN PLACE			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.71063
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:		e Year-to-Date	
	Primary General Other (specify) ▼		1100.00	
C.	Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD			Date of Receipt
•	Mailing Address 128 SUMMIT AVENUE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.71469
	UPPER MONTCLAIR	NJ	07043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	. '	RE CHIEF MEDICAL OFFIC	ER
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)		·····	125.00
	TOTAL This Period (last page this line number	only)	<b></b>	

	E A (FEC Form 3X RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 198 / 335   (check only one)     X
Any information or for commercial	copied from such Reports and purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<b>\</b>	OMMITTEE (In Full) EALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (L MR FREDER	ast, First, Middle Initial) ICK ELSTON			Date of Receipt
Mailing Addr	ess 106 GRAHAM TERI	RACE		10 24 2009
City SADDLE E	BROOK	State NJ	Zip Code 07663	Transaction ID: INC.A.71287  Amount of Each Receipt this Period
FEC ID num	ber of contributing cal committee.	C		25.00
Name of Em MEDCO HE	ployer ALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For: Primary Other (	y General (specify) ▼	<del> </del>	e Year-to-Date ▼ 550.00	
Full Name (L	ast, First, Middle Initial)			Date of Receipt
	ess 359 LONG HILL RC	10 24 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	FF MANOR	State NY	Zip Code 10510	Transaction ID: INC.A.71472  Amount of Each Receipt this Period
FEC ID num	ber of contributing cal committee.	C	10010	50.00
Name of Em MEDCO HE	ployer ALTH SOLUTIONS	Occupation VP COR	n P COMMUNICATIONS	
Receipt For: Primar Other (	y General specify) •	<del></del>	e Year-to-Date ▼ 1100.00	
Full Name (L DR ROBERT	ast, First, Middle Initial)			Date of Receipt
	ess 75 TWEED BLVD			M M / D D / Y Y Y Y Y 1 1 0 2 4 2 0 0 9
City		State	Zip Code	Transaction ID: INC.A.70968
FEC ID num	RANDVIEW ber of contributing cal committee.	C	10960	Amount of Each Receipt this Period 192.31
Name of Em MEDCO HE	ployer ALTH SOLUTIONS	Occupation CMO SV	n P MEDICAL&ANLYTC AFFF	
Receipt For: Primar Other (	y General (specify) ▼		e Year-to-Date ▼ 4230.82	
SUBTOTAL of	Receipts This Page (optional	)		267.31

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 199 / 335 (check only one)    X   11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any personders of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)  MR SCOTT ERHARDT  Mailing Address 11540 39TH AVE N			Date of Receipt
				10 24 2009
	City PLYMOUTH	State MN	Zip Code	Transaction ID: INC.A.71161
	FEC ID number of contributing federal political committee.	C	55441	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR ACCT MGMT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 925.00	
В.	Full Name (Last, First, Middle Initial) MR YAKOV ESTERLIS			Date of Receipt
	Mailing Address 100 WINSTON DRIVE 17 C NORTH	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71402
	CLIFFSIDE PARK	NJ	07010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
C.	Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI			Date of Receipt
	Mailing Address 15804 SORAWATER	DR.		10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71085
	LITHIA	FL	33547	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n DCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 840.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FE ITEMIZED RECEIF	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 200 / 335   (check only one)     X
Any information copied from or for commercial purposes,	such Reports and Statements ma other than using the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE MEDCO HEALTH SC	, ,	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Mi	ddle Initial)		Date of Receipt
Mailing Address 2020	HEATHER COVE		10 24 2009
City MEMPHIS	State TN	Zip Code 38119	Transaction ID: INC.A.71597
FEC ID number of contrib federal political committee	outing	30119	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GF	Occupation VP HEA	on LTH OUTCOME SOLUTION:	<del>-</del> s
Receipt For:  Primary  Other (specify) ▼	eneral Aggregate	e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Mi SUSAN FAUST	ddle Initial)		Date of Receipt
Mailing Address 6614	HERONSWOOD COVE	M M / D D / Y Y Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1 1	
City MEMPHIS	State TN	Zip Code 38119	Transaction ID: INC.A.71566  Amount of Each Receipt this Period
FEC ID number of contribution federal political committee	outing		50.00
Name of Employer ACCREDO HEALTH GF	Occupation VP CLIE	on INT SLS AND MGD CARE	
Receipt For:  Primary  Other (specify) ▼	eneral Aggregate	e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Mi	ddle Initial)		Date of Receipt
Mailing Address 32 EII	LEEN DR		10 24 2009
City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.71145  Amount of Each Receipt this Period
FEC ID number of contrib federal political committee	outing	07430	50.00
Name of Employer MEDCO HEALTH SOLU	TIONS Occupation VP CAR	on E ENHANCING SOLUTIONS	<del>-</del> -
Receipt For:  Primary G  Other (specify) ▼	eneral Aggregate	e Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts Th	is Page (optional)		150.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	(Crieck only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by an g the name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL ACTION COMMITTEE	(a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR THOMAS FEITEL		Date of Receipt
Mailing Address 58 APPLE HILL DI	3	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GILLETTE	State Zip Code NJ 07933	Transaction ID: INC.A.71208  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.23
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP CORP MKTG & E-COMM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4229.0	06
Full Name (Last, First, Middle Initial) MR STUART FELDMAN		Date of Receipt
Mailing Address 109 MEADOWBR	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City RANDOLPH	State Zip Code NJ 07869	Transaction ID: INC.A.70965  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	00 "
Full Name (Last, First, Middle Initial) MS DAWN FELDNER		Date of Receipt
Mailing Address 275 BIRCH STREI	ET	1 0 2 4 2 0 0 9
City EMERSON	State Zip Code NJ 07630	Transaction ID: INC.A.71372
FEC ID number of contributing federal political committee.	NJ 07630	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS REQUIREMEN	ITS
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.0	1
SURTOTAL of Receipts This Page (entire)	al)	242.23

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 202 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for cor	mmercial purposes, other than using th E OF COMMITTEE (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full N	DCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	, 
Mailin	HOMAS FERRAZZANO ng Address 464 SPRING AVE.			Date of Receipt  1 0 2 4 2 0 0 9
City RID(	GEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.71323  Amount of Each Receipt this Period
FEC	ID number of contributing al political committee.	C	07100	25.00
Name MED	e of Employer CO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	ipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
RONA	lame (Last, First, Middle Initial) ALD FIELMANN			Date of Receipt
Mailin	ng Address 2061 ARLEEN CT	10 24 2009		
City		State	Zip Code	Transaction ID: INC.A.71567
FEC	AUMBURG  ID number of contributing all political committee.	C	60194	Amount of Each Receipt this Period  25.00
Name ACCI	of Employer REDO HEALTH GROUP	Occupatio AVP SAL		
	ipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	lame (Last, First, Middle Initial) ON FISCHER			Date of Receipt
Mailin	ng Address 10 TRACY CIRCLE			10 24 2009
City CAN	IPBELL HALL	State NY	Zip Code 10916	Transaction ID: INC.A.71073  Amount of Each Receipt this Period
	ID number of contributing al political committee.	C		25.00
	e of Employer CO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	ipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
SUBTO	TAL of Receipts This Page (optional)	1	_	75.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 203 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person ng the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	NC. POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
MR EDWARD FISCHER  Mailing Address 465 OLD STONE	RD	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RIDGEWOOD	State Zip Code NJ 07450	Transaction ID: INC.A.71134  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL PROD INTEGRATION	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MEGHAN FITZGERALD	<b>_</b>	Date of Receipt
Mailing Address 6 MORGAN AVE	10 24 YYYY 10 24 2009	
City	State Zip Code	Transaction ID: INC.A.71529
NORWALK	CT 06851	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP BUSINESS DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.82	
Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS	-	Date of Receipt
Mailing Address 1933 MT. OLIVE AGOSTA ROAD		10 24 2009
City NEW BLOOMINGTON	State Zip Code OH 43341	Transaction ID: INC.A.71262  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR HLTH CARE OPS	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 550.00	
	nal)	267.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 204 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any per e name and address of any political committee POLITICAL ACTION COMMITTEE (a.k	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) CHAD FOREMAN Mailing Address 9544 DOGWOOD ES  City GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General	TATES  State Zip Code TN 38139  C  Occupation DIR FINANCE II  Aggregate Year-to-Date ▼	Date of Receipt  10 24 2009  Transaction ID: INC.A.71603  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) HOLLEY FORTH Mailing Address 115 BAYSIDE COUR  City RICHMOND  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)		Date of Receipt  M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) KEVIN FRANCO  Mailing Address 648 RIVERSIDE DR #222  City MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code TN 38103  C  Occupation VP FINANCE  Aggregate Year-to-Date ▼  1100.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		100.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 205 / 335 (check only one)    X
A	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO  Mailing Address 9 GREEN HILL TRAIL  City TROPHY CLUB  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State TX C		Date of Receipt    M M M
	Receipt For:  Primary General  Other (specify) ▼	-	ONAL SERVICE CENTER  Year-to-Date ▼  2200.00	
3.	Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL Mailing Address 1434 NARRAGANSET	T BLVD		Date of Receipt  1 0 2 4 2 0 0 9
	City	State	Zip Code	Transaction ID: INC.A.71096
	CRANSTON FEC ID number of contributing federal political committee.	C	02905	Amount of Each Receipt this Period  30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n / AFFAIRS	
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 660.00	]
_	Full Name (Last, First, Middle Initial) FELIX FRUEH			Date of Receipt
-	Mailing Address 14401 FALLING LEAF	DRIVE		10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71530
	DARNESTOWN FEC ID number of contributing federal political committee.	MD C	20878	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP RESE	n EARCH & DEVELOPMENT	7
	Receipt For: Primary General Other (specify)	_	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			130.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 206 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may e name and add	Ly not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) ROBERT FURTH			Date of Receipt
Mailing Address 1450 PORTLAND AV	ENUE		10 24 2009
City	State	Zip Code	Transaction ID: INC.A.71578
ST PAUL	MN	55104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio GENERA		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		550.00	
Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI	1		Date of Receipt
Mailing Address 24 MOREHOUSE PL			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.70964
NEW PROVIDENCE	NJ	07974	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP & CC		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI			Date of Receipt
Mailing Address 720 N. LARRABEE APT 1701			10 24 2009
City	State	Zip Code	Transaction ID: INC.A.71414
CHICAGO	IL	60654	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	n ENERAL MGR	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	4230.82	]
SUBTOTAL of Receipts This Page (optional) .	1		267.31

TOTAL This Period (last page this line number only) .....

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 207 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS PATRICIA GALLAGHER			Date of Receipt
	Mailing Address 842 ASHLER CT			10 24 2009
	City COLUMBUS	State OH	Zip Code 43235	Transaction ID: INC.A.71373  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio NATL AC	n CCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
 3.	Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO			Date of Receipt
	Mailing Address 69 LAKEVIEW DR	10 24 7 2009		
	City OLD TAPPAN	State NJ	Zip Code 07675	Transaction ID: INC.A.71255  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0.000	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIE	n NT RELATIONS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
_ >.	Full Name (Last, First, Middle Initial) MICHAEL GALVIN			Date of Receipt
	Mailing Address 25 BALLYMEADE RO	10 24 2009		
	City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.71448  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP/CHI	n IEF INFRASTRUCTURE OF	─ <del> </del> FR
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4230.82	
Γ,	SUBTOTAL of Receipts This Page (optional)			267.31
F	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 208 / 335 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	Statements may not be sold or used by any persename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR OMHARAISRIRAM GANGAIKONDAN-IYER Mailing Address 9 CAIRNES ROAD  City MORRIS PLAINS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07950  C  Occupation DIR TECHNOLOGY  Aggregate Year-to-Date   550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR PETER GAYLORD  Mailing Address 1201 BRIDGE STREE  City ASBURY PARK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	T  State Zip Code NJ 07712  C  Occupation SVP TREASURY & FINANCIAL EVA Aggregate Year-to-Date  1290.00	Date of Receipt  10 24 2009  Transaction ID: INC.A.70963  Amount of Each Receipt this Period  60.00
Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA Mailing Address 20 BROOKSHIRE DR  City ROBBINSVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 08691  C  Occupation GENERAL MGR GROUP  Aggregate Year-to-Date   1100.00	Date of Receipt  M M M 24 2009  Transaction ID: INC.A.71111  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)		135.00

SCHEDULE A (F	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 209 / 335   (check only one)
Any information copied from or for commercial purposes	n such Reports and Statements ma s, other than using the name and ad	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTE MEDCO HEALTH S	E (In Full) OLUTIONS INC. POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, I MATTHEW GIBBS	Middle Initial)		Date of Receipt
Mailing Address 27 N	I. WACKER DR. TE 246	10 24 2009	
City	State	Zip Code	Transaction ID: INC.A.71517
CHICAGO  FEC ID number of cont federal political committed		60606	Amount of Each Receipt this Period  75.00
Name of Employer MEDCO HEALTH SOL	UTIONS Occupation CHIEF C	on CLINICAL OFFICER	
Receipt For: Primary Other (specify)		e Year-to-Date ▼ 1650.00	
Full Name (Last, First, I MR ROBERT GIBBS	Middle Initial)		Date of Receipt
Mailing Address 544	DENMOOR COURT	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City GALLOWAY	State OH	Zip Code 43119	Transaction ID: INC.A.71038  Amount of Each Receipt this Period
FEC ID number of cont federal political committed	ributing	40110	12.50
Name of Employer MEDCO HEALTH SOL	UTIONS Occupation	on ARM PRACTICE	
Receipt For: Primary Other (specify)	General	e Year-to-Date ▼ 550.00	]
Full Name (Last, First, I MR THOMAS GILSON	Middle Initial)		Date of Receipt
Mailing Address 2 P	ELL FARM ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.71406
FEC ID number of cont federal political committed	ributing	07430	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOL	UTIONS Occupation SVP & C	on GENERAL MGR	
Receipt For: Primary Other (specify)	General	e Year-to-Date ▼ 4230.82	
SUBTOTAL of Receipts	This Page (optional)		279.81

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 210 / 335 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and addres	s of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR SCOTT GILYARD  Mailing Address 305 BERGAMOT I	DRIVE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  MEDINA  FEC ID number of contributing federal political committee.	State MN	Zip Code 55340	Transaction ID: INC.A.70969  Amount of Each Receipt this Period  192.30
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation PRES UHG Aggregate Ye	ar-to-Date ▼ 4230.60	
Full Name (Last, First, Middle Initial)  MR JONAH GITLITZ  Mailing Address 43 OVERLOOK RI	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y		
City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.71049  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR NATL A Aggregate Ye		50.00
Full Name (Last, First, Middle Initial) MR JAMES GORMAN Mailing Address 11 WASHBURN R	D		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  CANTON  FEC ID number of contributing federal political committee.	State CT	Zip Code 06022	Transaction ID: INC.A.71054  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	<del>'</del>	ENT & MKT PROG STRA	AT
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (option	al)		267.30

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 211 / 335 (check only one)  X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person he name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	. POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial)  MR JAMES GRANT, JR  Mailing Address 1928 BEVERLY LAN	JF	Date of Receipt
		10 24 2009
City BUFFALO GROVE	State Zip Code IL 60089	Transaction ID: INC.A.71125  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCIAL INSIGHTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) LAURIE GREENBERG		Date of Receipt
Mailing Address 27760 WOODLAND	GREEN	10 24 2009
City	State Zip Code	Transaction ID: INC.A.71527
BOERNE	TX 78015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL THERAPEUTICS	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR EDWARD GRIX	-1	Date of Receipt
Mailing Address 525 ORANGEBURG	i RD	10 24 2009
City PEARL RIVER	State Zip Code NY 10965	Transaction ID: INC.A.71148
FEC ID number of contributing federal political committee.	NY 10965	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS REQUIREMENTS	1
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 550.00	
		100.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	100.00
TOTAL This Period (last page this line numb	er only)	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 212 / 335 (check only one)    X
\ \ \	ny information copied from such Reports and Si r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	o solicit contributions from such committee.
∠ <b>4</b> .	Full Name (Last, First, Middle Initial) MS GINA GRUHN Mailing Address 13 WEATHER VANE D	DRIVE		Date of Receipt  1 0 2 4 2 0 0 9
	City CONVENT STATION FEC ID number of contributing	State NJ	Zip Code 07960	Transaction ID: INC.A.71196  Amount of Each Receipt this Period
	federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS		AL VP SALES-SYSTEMED	40.00
_	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 880.00	]
3.	Full Name (Last, First, Middle Initial) MS TRACY GRUNSFELD  Mailing Address 264 HARVEST AVE			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City STATEN ISLAND	State NY	Zip Code 10310	Transaction ID: INC.A.71043  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10010	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CON	n SUMER DRIVEN MKTS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
- ;.	Full Name (Last, First, Middle Initial) MRS CAROLYN GUGLIELMO Mailing Address 42 VETERANS PARKV	VAY		Date of Receipt  10 24 2009
	City PEARL RIVER	State NY	Zip Code	Transaction ID: INC.A.71340
	FEC ID number of contributing federal political committee.	C	10965	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio NATL AC	n CCT EXEC	7
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)			115.00

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 213 / 335   (check only one)		
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MR RICHARD GUIOR			Date of Receipt		
Mailing Address 50 BELLEVUE AV	Mailing Address 50 BELLEVUE AVE				
City	State	Zip Code	Transaction ID: INC.A.70987		
SUMMIT  FEC ID number of contributing federal political committee.	C	07901	Amount of Each Receipt this Period  90.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP				
Receipt For:  Primary General  Other (specify) ▼	<del> '</del>	Year-to-Date ▼ 1980.00			
Full Name (Last, First, Middle Initial) MS KAVITHA GULLAPALLI			Date of Receipt		
Mailing Address 67 ATHERTON CT	10 24 YYYYY				
City WAYNE	State NJ	Zip Code 07470	Transaction ID: INC.A.71124  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	07470	25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY			
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial) MS VALERIE HAERTEL			Date of Receipt		
Mailing Address 7 PARSLOE COU	RT		M M / D D / Y Y Y Y Y 1 1 0 1 0 9 1 1 0 1 0 1 0 1 0 1 0 1 0 1		
City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.71502		
FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INVE	STOR RELATIONS			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00			
SUBTOTAL of Receipts This Page (option	al)	_	165.00		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 214 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MARK HALLORAN		Date of Receipt
Mailing Address 19 KINGS RIDGE F		10 24 2009
City LONG VALLEY	State Zip Code NJ 07853	Transaction ID: INC.A.71288  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF INFO OFFICER	
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 4230.82	
Full Name (Last, First, Middle Initial) MR GREGORY HANSEN		Date of Receipt
Mailing Address 1659 ISABELLA PA	10 / 24 / 2009	
City	State Zip Code	Transaction ID: INC.A.71413
CHASKA  FEC ID number of contributing federal political committee.	MN 55318	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACCT SVCS & ADMIN	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MR CHRISTOPHER HARLOW		Date of Receipt
Mailing Address 8 PROSPECT PLACE	DE	10 24 2009
City POMPTON PLAINS	State Zip Code NJ 07444	Transaction ID: INC.A.71030  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optiona		267.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>A</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 215 / 335   (check only one)		
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL F	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)		
Full Name (Last, First, Middle Initial) SHARON HARRIS			Date of Receipt		
Mailing Address 186 N. WHITE STA					
City MEMPHIS	State TN	Zip Code 38117	Transaction ID: INC.A.71569  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		25.00		
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR HR	1			
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial) MR MARK HARTMANN	<b>.</b>		Date of Receipt		
Mailing Address 8980 KNOBLE CO	M M / D D / Y Y Y Y Y 1 1 0 2 4 2 0 0 9				
City EDEN PRAIRIE	State MN	Zip Code 55347	Transaction ID: INC.A.71163		
FEC ID number of contributing federal political committee.	C	33347	Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC				
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial) MR PETER HARTY			Date of Receipt		
Mailing Address 19520 YELLOW W	VING COURT		M M / D D / Y Y Y Y Y 1 Y 1 1 D D / 2 4 2 0 0 9		
City COLORADO SPRINGS	State CO	Zip Code	Transaction ID: INC.A.70966		
FEC ID number of contributing federal political committee.	C	80908	Amount of Each Receipt this Period  192.31		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP GOVI	n ERNMENT AFFAIRS			
Receipt For:  Primary General Other (specify) ▼		Year-to-Date ▼ 4230.82			
SUBTOTAL of Receipts This Page (option			242.31		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 216 / 335 (check only one)    X	
0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.	
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)	
۸.	Full Name (Last, First, Middle Initial) DAN HAYES			Date of Receipt	
	Mailing Address 4679 AYRON TERRA	10 24 2009			
	City	State	Zip Code	Transaction ID: INC.A.71562	
	PALM HARBOR	<u>FL</u>	34685	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP OPS	n		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1075.00		
	Full Name (Last, First, Middle Initial) MR MARK HEGGESTAD			Date of Receipt	
	Mailing Address 13210 N. 11TH AVE.			10 24 2009	
	City	State	Zip Code	Transaction ID: INC.A.71068	
	PHOENIX	AZ	85029	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE	ES		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)		550.00		
	Full Name (Last, First, Middle Initial) MR THOMAS HEKKER			Date of Receipt	
	Mailing Address 28 WEST THRID STR	10 24 2009			
	City	State	Zip Code	Transaction ID: INC.A.71454	
	SOUTH ORANGE	NJ	07079	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		30.00	
	Name of Employer MEDCO HEALTH SOLUTIONS		TECHNOLOGY		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 580.00		
Г		1		80.00	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 217 / 335 (check only one)    X
7	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR SCOTT HELMUS	Date of Receipt		
	Mailing Address 23 VALLEY RD	10 24 2009		
	City SUCCASUNNA	State NJ	Zip Code	Transaction ID: INC.A.71044
	FEC ID number of contributing federal political committee.	C	07876	Amount of Each Receipt this Period  75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIE	on INT SOLUTIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1650.00	
В.	Full Name (Last, First, Middle Initial) MR GLENN HERDLING	1		Date of Receipt
	Mailing Address 646 JAMES LN	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71180
	RIVER VALE  FEC ID number of contributing federal political committee.	NJ C	07675	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		EATIVE DEVELOPMENT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
с. С.	Full Name (Last, First, Middle Initial) MR ERIC HESS	Date of Receipt		
	Mailing Address 10 CARLTON RD	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71138
	FLANDERS  FEC ID number of contributing federal political committee.	C	07836	Amount of Each Receipt this Period  60.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENG	on INEERING & OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1120.00	
	SUBTOTAL of Receipts This Page (optional) .			160.00
r	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 218 / 335 (check only one)    X   11a
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JANE HILDEBRANDT Mailing Address 35 CASCADE WAY  City BUTLER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS		OM STRAT & DELIV	Date of Receipt    M M
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR DANIEL HLUDZINSKI Mailing Address 385 WASHINGTON S	ST		Date of Receipt    M M
City	State	Zip Code	Transaction ID: INC.A.71395
TAPPAN  FEC ID number of contributing federal political committee.	NY C Occupatio	10983	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	TECHNI	CAL SPECIALIST  e Year-to-Date ▼  550.00	
Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON			Date of Receipt
Mailing Address 16 LUTH TERRACE			10 24 2009
City WEST ORANGE	State NJ	Zip Code 07052	Transaction ID: INC.A.71260  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	UT UT	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio REGION	n IAL VP PHARMACIES	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optional) .			100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 219 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN Mailing Address 974 HILLCREST RC  City RIDGEWOOD FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State NJ C Occupation VP FACI		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify)  Full Name (Last, First, Middle Initial) MR TIMOTHY HOGAN Mailing Address 9 HIRLE ST	0 0	1100.00	Date of Receipt  10 24 2009
City  CORNWALL ON HUDSON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	- t	Zip Code 12520  n CAL SPECIALIST  Year-to-Date   550.00	Transaction ID: INC.A.71154  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR ROGER HOLLAND Mailing Address 41 SAINT RAPHAEL  City LAGUNA NIGUEL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State CA C Occupation VP SALE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 220 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any persename and address of any political committee  POLITICAL ACTION COMMITTEE (a.k.	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ROBERT HOLLIS Mailing Address 88 MILLS STREET  City MORRISTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07960  C  Occupation SR DIR BUSINESS DEVELOPMEN Aggregate Year-to-Date   550.00	Date of Receipt  M M M
Full Name (Last, First, Middle Initial) ELIZABETH HOLLOWAY Mailing Address 9222 RANDLE VALLE  City CORDOVA  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code TN 38018  C  Occupation ASSISTANT GENERAL COUNSEL Aggregate Year-to-Date  880.00	Date of Receipt  10 / 24 / 2009  Transaction ID: INC.A.71592  Amount of Each Receipt this Period  40.00
Full Name (Last, First, Middle Initial) MR MATTHEW HOLMES  Mailing Address 21979 SHADYBROOM  City NOVI  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code MI 48375  C  Occupation DIR CLINICAL SVCS  Aggregate Year-to-Date   550.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
SUBTOTAL of Receipts This Page (optional) .		90.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 221 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for con	mation copied from such Reports and Stanmercial purposes, other than using the result of COMMITTEE (In Full)  CO HEALTH SOLUTIONS INC. Policy in the control of the control	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.  . Medco Health PAC)
A. MR ST Mailing City ELMS FEC II federa Name MEDO Receip	ame (Last, First, Middle Initial) TEPHEN HOLODAK  g Address 49 S HILLSIDE AVE  SFORD  D number of contributing al political committee.  of Employer CO HEALTH SOLUTIONS  pt For: Primary General  Other (specify)		Zip Code 10523 n RVENTION DELIVERY SYS e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
RITA I Mailing City COR FEC II federa Name ACCF	ame (Last, First, Middle Initial) HOLT g Address 1558 N PISGAH ROAD DOVA D number of contributing al political committee. of Employer REDO HEALTH GROUP pt For: Primary General Other (specify)	State TN C Occupatio VP REIM	Zip Code 38016  n IBURSEMENT e Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TWIN FEC II federa Name MEDO	ame (Last, First, Middle Initial) YNTHIA HORN  g Address 9553 ANDREW DR  NSBURG  D number of contributing al political committee.  of Employer CO HEALTH SOLUTIONS  pt For: Primary General  Other (specify)	State OH C Occupatio VP CUS		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTO.	TAL of Receipts This Page (optional)			180.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 222 / 335   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may i	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL AG	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR STEVEN HOROWITZ			Date of Receipt
Mailing Address 4 MELISSA COUR	Т		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.71496
MONTVILLE  FEC ID number of contributing federal political committee.	NJ C	07045	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSIN	ESS PLANNING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) LYNN HOSTMYER			Date of Receipt
Mailing Address 6708 N.W. 112TH	10 24 YYYYY		
City OKLAHOMA CITY	State OK	Zip Code 73162	Transaction ID: INC.A.71577
FEC ID number of contributing federal political committee.	C	73102	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation GENERAL	. MGR - MULTI BRANCH	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	/ear-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR JEFFREY HULL			Date of Receipt
Mailing Address 2616 S 3B'S & K R	D		M M / D D / Y Y Y Y Y 1 1 0 2 4 2 0 0 9
City GALENA	State	Zip Code	Transaction ID: INC.A.71265
FEC ID number of contributing federal political committee.	OH C	43021	Amount of Each Receipt this Period  32.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR HI	LTH CARE OPS	
Receipt For:  Primary General  Other (specify) ▼		/ear-to-Date ▼ 696.00	
SUBTOTAL of Receipts This Page (options	al)		107.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 223 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 16		
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.)			
Full Name (Last, First, Middle Initial) MRS KIMBERLY HUMPHRIES Mailing Address 3726 ST PHILIP  City BARTLETT  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General	State Zip Code TN 38133  C  Occupation VP BUSINESS PLANNING  Aggregate Year-to-Date ▼  1100.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Full Name (Last, First, Middle Initial) MR DAVID ISRAEL Mailing Address 730 COLUMBUS A  City NEW YORK	Full Name (Last, First, Middle Initial) MR DAVID ISRAEL Mailing Address 730 COLUMBUS AVENUE  City State Zip Code			
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	Occupation VP BUSINESS DEV  Aggregate Year-to-Date ▼  1100.00	50.00		
Full Name (Last, First, Middle Initial) MS SUSAN ITO  Mailing Address 6366 SW 90TH ST	MS SUSAN ITO			
City GAINESVILLE FEC ID number of contributing federal political committee.	State Zip Code FL 32608	Transaction ID: INC.A.70982  Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation EXEC DIR CLINICAL SVCS  Aggregate Year-to-Date   1100.00			
SUBTOTAL of Receipts This Page (optional	l)	150.00		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 224 / 335 (check only one)    X
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persodress of any political committee to	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MS MARIANNE JACKS			Date of Receipt
	Mailing Address 329 MORRIS AVENU  City	E State	Zip Code	1 0 2 4 2 0 0 9  Transaction ID: INC.A.71021
	MOUNTAIN LAKES	NJ	07046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00	
	Full Name (Last, First, Middle Initial) MS MICHELLE JAEGER			Date of Receipt
	Mailing Address 302 HERMAN TERRA	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71459
	HOPKINS	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	
	Other (specify)		550.00	
	Full Name (Last, First, Middle Initial) MR JASON JAMES			Date of Receipt
	Mailing Address RR 2 BOX 2036			10 24 2009
	CANADENCIS	State	Zip Code	Transaction ID: INC.A.70975
	CANADENSIS	PA	18325	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHY	n SICIAN ENGAGEMENT	
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	
	Other (specify)		755.00	
	SUBTOTAL of Receipts This Page (optional) .	1		110.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 225 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	tatements may not be sold or used by any pername and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR TODD JEFFREY Mailing Address 15 ELIZABETH STREI  City DUMONT  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) ROBERT JINKS  Mailing Address 22 PAGE AVE	1100.00	Date of Receipt
City  LYNDHURST  FEC ID number of contributing federal political committee.	State Zip Code NJ 07071	Transaction ID: INC.A.71034  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP BUSINESS REQUIREMENTS Aggregate Year-to-Date ▼  1100.00	
Full Name (Last, First, Middle Initial) MR WILLIAM JOEL Mailing Address 32 VENTOSA DR		Date of Receipt  10 24 2009
City  MORRISTOWN  FEC ID number of contributing federal political committee.	State Zip Code NJ 07960  C	Transaction ID: INC.A.71199  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR ANALYTICAL SVCS  Aggregate Year-to-Date ▼  550.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	125.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 226 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
(	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۰ ۸.	Full Name (Last, First, Middle Initial) MRS REGINA JONES			Date of Receipt
	Mailing Address POST OFFICE BOX 75	10 24 2009		
	City LAS VEGAS	State NV	Zip Code 89136	Transaction ID: INC.A.71137  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP CUS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1125.00	]
– В.	Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12224 MONTCALM ST	DEET		Date of Receipt
	Mailing Address   12224 MONTCALINI ST	10 24 2009		
	City CARMEL	State IN	Zip Code 46032	Transaction ID: INC.A.71343
	FEC ID number of contributing federal political committee.	C	40032	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
_ С.	Full Name (Last, First, Middle Initial) MS KATHRYN JONSRUD			Date of Receipt
	Mailing Address 16357 VICTORIA CUR	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71190
	PRIOR LAKE  FEC ID number of contributing federal political committee.	C	55372	Amount of Each Receipt this Period  35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIF	n ENT & MKT PROG STRAT	
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 770.00	
	SUBTOTAL of Receipts This Page (optional)			135.00
	TOTAL This Period (last page this line number of		·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 227 / 335 (check only one)    X   11a
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR STEVEN KARATY Mailing Address 19 PARK AVE			Date of Receipt
		O	7: 0 !	10 24 2009
	City POMPTON PLAINS	State NJ	Zip Code 07444	Transaction ID: INC.A.70994  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n PLANNING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- В.	Full Name (Last, First, Middle Initial) MS BECKY KAUS	Date of Receipt		
	Mailing Address N81 W18359 TOURS	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71171
	MENOMONEE FALLS FEC ID number of contributing	WI	53051	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on CLINICAL SVCS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		550.00	
c. –	Full Name (Last, First, Middle Initial) MR WILLIAM KEELER	Date of Receipt		
	Mailing Address 63 MOUNTAIN GLEN	10 24 2009		
	City RINGWOOD	State NJ	Zip Code 07456	Transaction ID: INC.A.71420
	FEC ID number of contributing federal political committee.	C	0/456	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	on CAL SPECIALIST	7
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line numbe		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 228 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS DEEPTI KEHOE Mailing Address 995 PINES TERR			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.71081  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FIN	n ANCIAL & ANALYTICAL SVO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
- 3.	Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III Mailing Address 1970 WOODLANDS P	1		Date of Receipt
		10 24 2009		
	City POWELL	State OH	Zip Code 43065	Transaction ID: INC.A.71256  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	n AL MGR GROUP	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
- ).	Full Name (Last, First, Middle Initial) MR KEVIN KELLY	<u> </u>		Date of Receipt
<i>,</i> .	Mailing Address 251 POPLAR AVE			1 0 2 4 2 0 0 9
	City HACKENSACK	State NJ	Zip Code 07601	Transaction ID: INC.A.71019  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07001	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	. '	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)	ı	······	125.00
ļ	TOTAL This Period (last page this line number	only)	<b></b>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 229 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma le name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR PETER KENNY			Date of Receipt
	Mailing Address 6040 BOULEVARD E	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71374
	WEST NEW YORK	NJ	07093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n ACCT MGMT	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
В.	Full Name (Last, First, Middle Initial) MS LISA KETNER			Date of Receipt
	Mailing Address 7 POINT VIEW	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71241
	OAKLAND	NJ	07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		IBER STRATEGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		1100.00	
С. С.	Full Name (Last, First, Middle Initial) MS INNA KHANIN	1		Date of Receipt
	Mailing Address 3403 SPRINGBROOI	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71451
	EDISON	NJ	08820	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	- '	CAL SPECIALIST	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	
	Other (specify)		550.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	<b>A</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 230 / 335   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS DONNA KLEIN			Date of Receipt
Mailing Address 1080 FOREST CL	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City LAKEWOOD	State OH	Zip Code 44107	Transaction ID: INC.A.71555  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	44107	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER			Date of Receipt
Mailing Address 121 CONKLING T	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City CHESTER	State NY	Zip Code 10918	Transaction ID: INC.A.71385  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	EC ID number of contributing		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) KENNETH KLEPPER			Date of Receipt
Mailing Address 295 GLEN PLACE	<u> </u>		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.71433  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07417	192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES &	n CHIEF OPERATING OFFIC	ER
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 4230.60	
SUBTOTAL of Receipts This Page (option			267.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 231 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and addre	ess of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) RICHARD KLUSOVSKY  Mailing Address 1016 FAIRWOOD LA  City ACWORTH  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State GA  C  Occupation AVP MANA	Zip Code 30101  AGED CARE  fear-to-Date ▼	Date of Receipt    M M
Full Name (Last, First, Middle Initial) MR BRADFORD KOGEN Mailing Address 555 FORBUSH STRE  City BOONTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ  C  Occupation SR DIR CL	Zip Code 07005 LIENT RETAIL ′ear-to-Date ▼	Date of Receipt  M M M 24 2009  Transaction ID: INC.A.71377  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI  Mailing Address 920 CLARK STREET  City BOWLING GREEN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>, '</del>	Zip Code 43402  ACCT EXEC  Year-to-Date ▼ 1100.00	Date of Receipt  M M M / D D M 24 2009  Transaction ID: INC.A.71050  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional) .			100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 232 / 335 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY Mailing Address 143 DEERFIELD TE  City MAHWAH  FEC ID number of contributing federal political committee.	ERRACE State NJ	Zip Code 07430	Date of Receipt  10 24 2009  Transaction ID: INC.A.71090  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	<del> </del>	n R PRODUCT • Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR ALEXANDER KRYNICKI Mailing Address 60 BEECH ROAD  City RANDOLPH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07869  n FECHNOLOGY 9 Year-to-Date  550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS BARBARA KRZAK Mailing Address 495 ISLAND WAY  City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07417  TECHNOLOGY e Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	l)		105.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 233 / 335 (check only one)    X
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
_	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN  Mailing Address 2735 YORK RD			Date of Receipt
		01-1-	7's Oads	10 24 2009
	City COLUMBUS	State OH	Zip Code 43221	Transaction ID: INC.A.71358  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGION	n IAL VP PHARMACIES	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
- В.	Full Name (Last, First, Middle Initial) MR DEEPAK KUMAR			Date of Receipt
	Mailing Address 50 MANCHESTER CT	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71236
	KINNELON FEC ID number of contributing federal political committee.	NJ C	07405	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	n CAL SPECIALIST	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	]
С. С.	Full Name (Last, First, Middle Initial) MATTHEW KUPFERBERG			Date of Receipt
	Mailing Address 3235 CAMBRIDGE AV APT 2J	VENUE,		10 24 2009
	City BRONX	State NY	Zip Code 10463	Transaction ID: INC.A.71512  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR ATTO		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional) .		<b>1</b>	100.00
t	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 234 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MARK LANDY Mailing Address 18 LADIK PL  City MONTVALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State NJ C Occupation VP SVC	Zip Code 07645	Date of Receipt    M M
Full Name (Last, First, Middle Initial)  JAMES LANGLEY  Mailing Address 10921 MAIN RANGE  City  LITTLETON  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General	State CO C Occupation VP REIM	Zip Code 80127	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR EDWARD LAPUSHCHIK Mailing Address 2 OLD LANE  City MONTVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)  Other (specify)	<del> </del>	Zip Code 07045 n CAL SPECIALIST • Year-to-Date ▼	Date of Receipt  M M M
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line numb			150.00

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee t	
/	C. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MS CYNTHIA LAUBACHER  Mailing Address 1100 KIMBERLY C	OURT	Date of Receipt
City ROSEVILLE	State Zip Code CA 95661	Transaction ID: INC.A.71243  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR GOVERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00	
Full Name (Last, First, Middle Initial) JOSEPH LENZ		Date of Receipt
Mailing Address 1735 LINKENHOLT	10 24 2009	
City	State Zip Code	Transaction ID: INC.A.71473
COLLIERVILLE	TN 38017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PERFORMANCE STRATEGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) EMMA LEVIN		Date of Receipt
Mailing Address 18 SALEM RD		10 24 YYYYY
City EAST BRUNSWICK	State Zip Code NJ 08816	Transaction ID: INC.A.71501  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional	J)	150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 236 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) MR ROBERT LONG Mailing Address 18 HARLIND TERRAC  City RAMSEY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C	Zip Code 07446	Date of Receipt  10 24 2009  Transaction ID: INC.A.71231  Amount of Each Receipt this Period  50.00
_	Receipt For: Primary General Other (specify)		L ACCT EXEC  • Year-to-Date ▼  1100.00	
В.	Full Name (Last, First, Middle Initial) MR BRICE LOVE Mailing Address 2390 BRANDON RD			Date of Receipt  10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71194
	COLUMBUS  FEC ID number of contributing federal political committee.	ОН	43221	Amount of Each Receipt this Period  12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n ARM PRACTICE	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 550.00	
- C.	Full Name (Last, First, Middle Initial)  MR ROSS LUCE  Mailing Address 1066 WEST GROVE C	:T		Date of Receipt
			7: 0 1	10 24 2009
	City GIBSONIA	State PA	Zip Code 15044	Transaction ID: INC.A.71103  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1320.00	
	SUBTOTAL of Receipts This Page (optional)			92.50
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 237 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any persename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	
Full Name (Last, First, Middle Initial)  MS VERONA MACMAHON  Mailing Address 1504 WEST CULLON  UNIT G  City  CHICAGO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code IL 60613  C  Occupation SR DIR ACCT MGMT OPS  Aggregate Year-to-Date   550.00	Date of Receipt  M M M / 24 / 2009  Transaction ID: INC.A.71399  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR KENNETH MALLEY Mailing Address 764 W. SADDLE RIV  City HO HO KUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	ER ROAD  State Zip Code NJ 07423  C  Occupation VP PRODUCT & CHANNEL MKTIN Aggregate Year-to-Date   1100.00	Date of Receipt    M   M   24   2009    Transaction ID: INC.A.71139   Amount of Each Receipt this Period   50.00
Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO  Mailing Address 33 HICKORY TAVER  City GILLETTE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	N RD  State Zip Code NJ 07933  C  Occupation VP FINANCE  Aggregate Year-to-Date ▼  1100.00	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)		125.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 238 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	i. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS ILENE MARCUS			Date of Receipt
	Mailing Address 97 BLUEBERRY DR			10 24 2009
	City WOODCLIFF LAKE DR	State NJ	Zip Code 07675	Transaction ID: INC.A.71307  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n FINANCE	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- В.	Full Name (Last, First, Middle Initial) MR JOSEPH MARINELLI Mailing Address 351 SOUND BEACH A	I		Date of Receipt
		10 24 2009		
	City OLD GREENWICH	State CT	Zip Code 06870	Transaction ID: INC.A.71086  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00070	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n MEDICARE OPS	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	
- С.	Full Name (Last, First, Middle Initial) LORI MARINO			Date of Receipt
-	Mailing Address 31 UNDERWOOD DR	IVE		10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71516
	WEST ORANGE FEC ID number of contributing federal political committee.	C	07052	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST G	n ENERAL COUNSEL	
	Receipt For:  Primary  General  Other (specify) ▼	, '	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 239 / 335 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL Mailing Address W144 N7150 TERR.  City MENOMONEE FALLS FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State WI  C  Occupation SR NATL	Zip Code 53051  ACCT EXEC  Year-to-Date ▼  1100.00	Date of Receipt  M M M / 24
Full Name (Last, First, Middle Initial) MR JOSEPH MARSIGLIANO Mailing Address 11 ECHO HILL ROA  City MONTVALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ  C  Occupation SR DIR 1	Zip Code 07645 07645 TECHNOLOGY Year-to-Date ▼	Date of Receipt  M M M 24 2009  Transaction ID: INC.A.71518  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) SHELLY MARTIN  Mailing Address 9536 DOE MEADOV  City GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State TN C Occupation DIR HR	Zip Code 38139	Date of Receipt  M M / D D / 2 4 2 0 0 9  Transaction ID: INC.A.71596  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)	)		100.00

	LE A (FEC Form 3X D RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE   240 / 335   (check only one)
Any informatio or for commercial	n copied from such Reports an cial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
\	COMMITTEE (In Full) HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name	(Last, First, Middle Initial)			Date of Receipt
Mailing Add	dress 1882 E LAUREL HO	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City GERMAN	JTOWN	State TN	Zip Code 38139	Transaction ID: INC.A.71586  Amount of Each Receipt this Period
FEC ID nui	mber of contributing tical committee.	C	00100	150.00
Name of Er ACCREDO	mployer ) HEALTH GROUP	Occupation	n ENT - CCS	
Receipt For Prima Other		<del>'</del>	e Year-to-Date ▼ 2275.00	
Full Name	(Last, First, Middle Initial)			Date of Receipt
	dress 11825 SHEPPARDS	M M / D D / Y Y Y Y Y 1 1 1 0 1 0 1 1 1 1 1 1 1 1 1		
City CLARKS	VII I E	State MD	Zip Code 21029	Transaction ID: INC.A.71119  Amount of Each Receipt this Period
FEC ID nui	FEC ID number of contributing federal political committee.  Name of Employer Occupation  MEDICA HEALTH SOLUTIONS  Occupation		21020	192.30
Name of Er MEDCO H			n ENERAL MGR	
Receipt For Prima		- <del></del>	e Year-to-Date ▼ 4230.60	
	(Last, First, Middle Initial) RD MARTINEZ			Date of Receipt
	dress 35 SALTER PLACE			M M / D D / Y Y Y Y Y 1 1 0 2 4 2 0 0 9
City MAPLEW	/OOD	State NJ	Zip Code 07040	Transaction ID: INC.A.71455
FEC ID nui	mber of contributing tical committee.	C	0/040	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Occupation SR DIR F		n PRODUCT MGMT		
Receipt For Prima			Year-to-Date ▼ 550.00	
SUBTOTAL	of Receipts This Page (optiona	) 		367.30

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 241 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
A oi	ny information copied from such Reports and S r for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JEFFREY MAY			Date of Receipt
	Mailing Address 137 WASHINGTON A	VE State	Zip Code	10 24 2009
	HILLSDALE	NJ	07642	Transaction ID: INC.A.71345  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP DRI	n UG DISTRIB & CONTROL	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 4230.60	
— В.	Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE			Date of Receipt
	Mailing Address 11 JARDINE COURT	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71146
	MORRIS PLAINS	NJ	07950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP SALE	n ES AND MARKETING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	]
 C.	Full Name (Last, First, Middle Initial) THOMAS MCCANN	1		Date of Receipt
	Mailing Address 9600 DOVE SPRING	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	CERMANITOWN	State	Zip Code	Transaction ID: INC.A.71598
	GERMANTOWN FEC ID number of contributing federal political committee.	C	38139	Amount of Each Receipt this Period  50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP SALE		
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)		<b>_</b>	292.30
	FOTAL This Period (last page this line number		·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 242 / 335 (check only one)    X		
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)					
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MR THOMAS MCDONALD			Date of Receipt		
Mailing Address 0-45 27TH ST	Mailing Address 0-45 27TH ST				
City	State	Zip Code	1 0 2 4 2 0 0 9 Transaction ID: INC.A.71286		
FAIR LAWN	NJ	07410	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n HNOLOGY			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial) MS ANNE MCGURRIN			Date of Receipt		
Mailing Address 28 ROSEMILT PLACE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: INC.A.71520		
MORRISTOWN	NJ	07960	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR MAF	n RKET SEGMENT SOLUTION			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH			Date of Receipt		
Mailing Address 87 ROSELAWN RD			10 24 YYYY 10 24 2009		
City	State	Zip Code	Transaction ID: INC.A.71242		
HIGHLAND MILLS	NY	10930	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		192.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST GI	n ENERAL COUNSEL			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4224.00			
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	242.00		

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	<b>A</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 243 / 335   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	<u>-                                      </u>	•	
Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA			Date of Receipt
Mailing Address 112 GREEN TERF	RACE WAY		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WEST MILFORD	State NJ	Zip Code 07480	Transaction ID: INC.A.71392  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP BUS	n SINESS OPS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 4230.82	
Full Name (Last, First, Middle Initial) MS LAURA MENVILLE			Date of Receipt
Mailing Address 23 UNION HILL RI	M M / D D / Y Y Y Y Y 1 1 1 0 2 4 2 0 0 9		
City MORRIS PLAINS	State NJ	Zip Code 07950	Transaction ID: INC.A.71422  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07330	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MS BARBARA MENZEL			Date of Receipt
Mailing Address 921 AMARYLLIS A	AVE		M M / D D / Y Y Y Y Y 1 1 0 2 4 2 0 0 9
City ORADELL	State NJ	Zip Code 07649	Transaction ID: INC.A.71042  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07010	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUS PLANNING & ADMIN	7
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (option	-10		242.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 244 / 335   (check only one)     X		
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Full Name (Last, First, Middle Initial) DANETTE MEREDITH			Date of Receipt		
Mailing Address 600 W 2ND AVE			10 24 2009		
City	State	Zip Code	Transaction ID: INC.A.71560		
DERRY FEC ID number of contributing federal political committee.	PA C	15627	Amount of Each Receipt this Period  25.00		
Name of Employer ACCREDO HEALTH GROUP	Occupatio AVP SAL				
Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial) DAVID MILLER			Date of Receipt		
Mailing Address 7 CLOVER LANE	10 24 2009				
City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INC.A.70993  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	07000	50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP LABO	n DR RELATIONS			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00			
Full Name (Last, First, Middle Initial) MRS KAREN MILLER			Date of Receipt		
City DENVILLE	State NJ	Zip Code 07834	1 0 2 4 2 0 0 9  Transaction ID: INC.A.70983		
FEC ID number of contributing federal political committee.	C	0/834	Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n R INTERNAL AUDIT			
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00			
SUBTOTAL of Receipts This Page (options			125.00		

SCHEDULE A (FEC FITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 245 / 335 (check only one)    X   11a		
or for commercial purposes, other  NAME OF COMMITTEE (In F	than using the name and addull)	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
Full Name (Last, First, Middle MR GIOVANNI MINARDI Mailing Address 12 LINCC City KINNELON	Initial)	ACTION COMMITTEE (a.k.a	Date of Receipt  10 24 2009  Transaction ID: INC.A.71408  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		25.00		
Name of Employer MEDCO HEALTH SOLUTION  Receipt For:  Primary Gener  Other (specify) ▼	SR DIR -	TECHNOLOGY  P Year-to-Date ▼  550.00			
MR BHUPESH MISTRY	Full Name (Last, First, Middle Initial) MR BHUPESH MISTRY Mailing Address 106 HAMBURG ROAD				
City	State	Zip Code	1 0 2 4 2 0 0 9  Transaction ID: INC.A.71003		
PARSIPPANY FEC ID number of contributing federal political committee.	NJ C	07054	Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTION	Occupatio TECHNIC	n CAL SPECIALIST			
Receipt For:  Primary  Gener  Other (specify) ▼		e Year-to-Date ▼ 550.00			
MS JULIANA MOLEK	Full Name (Last, First, Middle Initial) MS JULIANA MOLEK Mailing Address 8620 LAKE RILEY DRIVE				
City CHANHASSEN	State MN	Zip Code 55317	Transaction ID: INC.A.71127		
FEC ID number of contributing federal political committee.		33317	Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTION	Occupatio SR DIR S	n SPECIAL MARKETS			
Receipt For:  Primary Gener  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 675.00			
SUBTOTAL of Receipts This Pa	ge (optional)		100.00		
TOTAL This Period (last page the	is line number only)				

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 246 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
	ny information copied from such Reports and Si r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC. P	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial) ROBERT MOLONEY			Date of Receipt
	Mailing Address 24 ABBINGTON TERF		71.0.1	10 24 2009
	City GLEN ROCK	State NJ	Zip Code 07452	Transaction ID: INC.A.71489  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNIC	n CAL SPECIALIST	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 550.00	
- 3.	Full Name (Last, First, Middle Initial) MR PETER MONKHOUSE			Date of Receipt
	Mailing Address 1320 BRONCO CIR	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71135
	WARRINGTON FEC ID number of contributing federal political committee.	C	18976	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n FECHNOLOGY	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 550.00	
_	Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY	Date of Receipt		
	Mailing Address 86 WELLINGTON AVE	10 24 YYYYY 10 24 2009		
	City SHORT HILLS	State NJ	Zip Code 07078	Transaction ID: INC.A.70972  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 4224.00	
	SUBTOTAL of Receipts This Page (optional)			242.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 247/335   (check only one)     X   11a
Any ir or for	nformation copied from such Reports and St commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 \	AME OF COMMITTEE (In Full) EDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
	II Name (Last, First, Middle Initial) S THERESA MORMILE			Date of Receipt
Ma	ailing Address 59 VALLEY VIEW TER	R		10 24 2009
Cit	ty ONTVALE	State NJ	Zip Code 07645	Transaction ID: INC.A.71346  Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	07045	50.00
Na Mi	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio VP FINA		
Re	eceipt For: Primary General Other (specify)		e Year-to-Date ▼ 1100.00	
	II Name (Last, First, Middle Initial) R ROBERT MULLER	Date of Receipt		
Ma	ailing Address 69 FERN PLACE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Cit	ty ARAMUS	State NJ	Zip Code 07652	Transaction ID: INC.A.71360  Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	07002	50.00
Na MI	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio VP HLTH	n H BUS CLIENT ENROLLMN	— [
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
	II Name (Last, First, Middle Initial) S BECKY NAGLE			Date of Receipt
	ailing Address 64 WALTER AVE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Cit	ty ASBROUCK HEIGHTS	State NJ	Zip Code 07604	Transaction ID: INC.A.71048  Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	07004	50.00
Na MI	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL SVCS	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
SUB	TOTAL of Receipts This Page (optional)		<b>__</b>	150.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 248 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17	
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)	
A.	Full Name (Last, First, Middle Initial) MR ANDREW NANICK			Date of Receipt	
	Mailing Address 220 LAUREL BAY DR	10 24 2009			
	City	State	Zip Code	Transaction ID: INC.A.71053	
	MURRELLS INLET	SC	29576	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on CLINICAL SVCS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	]	
В.	Full Name (Last, First, Middle Initial) JANARDHAN NARAYANAN	Date of Receipt			
	Mailing Address 32 BLACKSTONE DR	10 24 2009			
	City	State	Zip Code	Transaction ID: INC.A.71528	
	PRINCETON	NJ	08540	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		39.00	
	Name of Employer MEDCO HEALTH SOLUTIONS		MARKET STRATEGY		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 634.00		
C.	Full Name (Last, First, Middle Initial) MS BARBARA NEAVERTH	•		Date of Receipt	
	Mailing Address PO BOX 523	Mailing Address PO BOX 523			
	City	State	Zip Code	Transaction ID: INC.A.71027	
	SUGAR LOAF	NY	10981	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS		BUSINESS REQUIREMENT	S	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00		
	SUBTOTAL of Receipts This Page (optional)			89.00	
	TOTAL This Period (last page this line number		<u> </u>		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 249 / 335 (check only one)    X
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR MICHAEL NICODEMO  Mailing Address 407 MEER AVE  City  WYCKOFF	State Zip Code NJ 07481	Date of Receipt  10 24 2009  Transaction ID: INC.A.71391  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation VP INFO TECHNOLOGY  Aggregate Year-to-Date   820.00	50.00
Full Name (Last, First, Middle Initial) MS ARLENE NOLAN Mailing Address 319 BOGERT AVEN  City RIDGEWOOD  FEC ID number of contributing federal political committee.	State Zip Code NJ 07450	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation VP FINANCE  Aggregate Year-to-Date ▼  1100.00	
Full Name (Last, First, Middle Initial) MR HAIK NOVSHADIAN Mailing Address 45 DAVIS ROAD		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SPARTA  FEC ID number of contributing federal political committee.	State Zip Code NJ 07871	Transaction ID: INC.A.71170  Amount of Each Receipt this Period  38.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR CLINICAL THERAPEUTICS  Aggregate Year-to-Date ▼  836.00	
SUBTOTAL of Receipts This Page (optional	)	138.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 250 / 335 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS JANINE NOWATZKY  Mailing Address 24 CHEROKEE TF	RAIL	Date of Receipt  10 24 2009
City OAKLAND FEC ID number of contributing	State Zip Code NJ 07436	Transaction ID: INC.A.71230  Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR DIR MARKET STRATEGY Aggregate Year-to-Date ▼	25.00
Primary General Other (specify)  Full Name (Last, First, Middle Initial) MR ROBERT O'CONNELL	550.00	Date of Receipt
Mailing Address 12001 PEONY CT  City  TAMPA  FEC ID number of contributing	State Zip Code FL 33635	Transaction ID: INC.A.71083  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation DIR SECURITY Aggregate Year-to-Date	25.00
Other (specify)  Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER Mailing Address 6 PARK DR SOUT	550.00	Date of Receipt
City RYE  FEC ID number of contributing federal political committee.	State Zip Code NY 10580	Transaction ID: INC.A.71375  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP COO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (options	al)	100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 251 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	POLITICAL .	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)  MR SUNNY OGBONDA  Mailing Address 79 LAUREL WOOD C	OUDT		Date of Receipt
	- WOOD C	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71006
	ROCKAWAY TOWNSHIP	NJ	07866	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	on SINESS REQUIREMENTS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- B.	Full Name (Last, First, Middle Initial) MR MELVIN OHL	Date of Receipt		
	Mailing Address 274 E FRANKLIN TPK	10 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State		Zip Code	Transaction ID: INC.A.71317
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CUREMENT & INVENTORY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
с. С.	Full Name (Last, First, Middle Initial) MRS SUE OLIVER			
	Mailing Address 11 LEE DRIVE			10 24 2009
	City NORTH HALEDON	State NJ	Zip Code 07508	Transaction ID: INC.A.71327  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		07300	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
Ì	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 252 / 335 (check only one)    X			
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full)					
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
A.	Full Name (Last, First, Middle Initial) MS CLAUDINE OLSEN			Date of Receipt			
	Mailing Address 4 HIGHGATE CT	<b></b>		10 24 2009			
	City <u>SUFFERN</u>	State NY	Zip Code 10901	Transaction ID: INC.A.71368  Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	OCT EXEC				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00				
В.	Full Name (Last, First, Middle Initial) ALEXANDER ONIK			Date of Receipt			
	Mailing Address 1 SCHINDLER CT		10 24 2009				
	City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.71478			
	FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period  25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY				
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	]			
C.	Full Name (Last, First, Middle Initial) MS NATALYA ONIK						
	Mailing Address 1 SCHINDLER CT	Mailing Address 1 SCHINDLER CT					
	City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.71202  Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY				
	Receipt For:  Primary General  Other (specify) ▼	<del>, '</del>	e Year-to-Date ▼ 550.00				
	SUBTOTAL of Receipts This Page (optional) .	1		75.00			
	TOTAL This Period (last page this line number	r only)	·				

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 253 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sold.  C. POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS LUDIVINA PACAMARRA Mailing Address 4 TEAK COURT City	State Zip Code	Date of Receipt  10 24 2009  Transaction ID: INC.A.71304
RINGWOOD  FEC ID number of contributing federal political committee.	NJ 07456	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation EXEC DIR TECHNOLOGY  Aggregate Year-to-Date   1100.00	
Full Name (Last, First, Middle Initial) MS DAWN PAGANO Mailing Address 185 PASCACK RO	AD	Date of Receipt
City PARK RIDGE	State Zip Code NJ 07656	Transaction ID: INC.A.71303  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation GROUP COO  Aggregate Year-to-Date   1100.00	
Full Name (Last, First, Middle Initial) MR RICHARD PAGANO		Date of Receipt
Mailing Address 185 PASCACK RD		10 24 2009
City PARK RIDGE	State Zip Code NJ 07656	Transaction ID: INC.A.71297  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR DIR BUSINESS REQUIREMENTS	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
	J)	125.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 254 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE			Date of Receipt
	Mailing Address 12 MILLBROOK COU		7.0.1	10 24 2009
	City LIVINGSTON	State NJ	Zip Code 07039	Transaction ID: INC.A.71192  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP RETI	n IREE SOLUTIONS MKTG	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1195.00	
- 3.	Full Name (Last, First, Middle Initial) MS GIRA PATEL			Date of Receipt
	Mailing Address 5 FOXHILL RUN			10 24 YYYY 2009
	City	State	Zip Code	Transaction ID: INC.A.71186
	MONMOUTH JUNCTION	NJ	08852	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on BUSINESS REQUIREMENTS	3
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- ).	Full Name (Last, First, Middle Initial) MR JAY PATEL			Date of Receipt
	Mailing Address 14 BROWNSTONE T	ERRACE		10 24 YYYY 2009
	City HAWTHORNE	State	Zip Code	Transaction ID: INC.A.71463
	FEC ID number of contributing federal political committee.	NJ C	07506	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional) .	1		100.00
Ī	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 255 / 335 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and addres	s of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS CATHY PATTEN Mailing Address 2001 MEADOWS A  City LANTANA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State TX C Occupation VP/GM Aggregate Ye	Zip Code 76226 ar-to-Date ▼	Date of Receipt  M M M / 24  2009  Transaction ID: INC.A.71259  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS Mailing Address 2780 FOLKSTONE  City COLUMBUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	ROAD  State OH  C  Occupation VP/GM  Aggregate Ye	Zip Code 43220 ar-to-Date ▼	Date of Receipt  M M M / 24 / 2009  Transaction ID: INC.A.71060  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI Mailing Address 211 WILTSIE COUF  City WYCKOFF  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupation	Zip Code 07481 ECHNOLOGY ar-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	)		80.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 256 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MERRI PENDERGRASS, MD Mailing Address 3201 QUEENSBURY  City COLLEYVILLE  FEC ID number of contributing federal political committee.	Y WAY WEST State TX	Zip Code 76034	Date of Receipt  1 0 2 4 2 0 0 9  Transaction ID: INC.A.71539  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		n ONAL PRACTICE LEADER e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) JIMMY PERREN  Mailing Address 1250 BRAY PARK D	OR EAST		Date of Receipt  10 24 2009
City	State	Zip Code	Transaction ID: INC.A.71564
COLLIERVILLE	TN	38017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer ACCREDO HEALTH GROUP		ULATORY COMPLIANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1650.00	
Full Name (Last, First, Middle Initial) MR MICHAEL PETEROY			Date of Receipt
Mailing Address 4769 STAVANGER	LANE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LAS VEGAS	State NV	Zip Code 89147	Transaction ID: INC.A.71281  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03147	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	n DDUCT DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)			150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 257 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ind Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR NATHAN PETERSON Mailing Address 1520 PEMBROKE  City CHANHASSEN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	`	Date of Receipt    M M M
Receipt For: Primary General Other (specify)	NATL ACCT EXEC  Aggregate Year-to-Date ▼  550.00	
Full Name (Last, First, Middle Initial) MR THOMAS PETTYES Mailing Address 8522 UPLAND LN	NORTH	Date of Receipt  10 24 2009
City	State Zip Code	Transaction ID: INC.A.71113
MAPLE GROVE	MN 55311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERAL MGR GROUP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1100.00	
Full Name (Last, First, Middle Initial) MARTINE PFLIEGER Mailing Address 44 HENRY TERRA	ACE	Date of Receipt  1 0 2 4 2 0 0 9
City	State Zip Code	Transaction ID: INC.A.71509
LINCOLN PARK FEC ID number of contributing federal political committee.	NJ 07035	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ATTORNEY	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 550.00	
		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 258 / 335 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR LOUIS PICONE			Date of Receipt
Mailing Address 37 TAMARACK DRIVE			10 24 2009
City	State	Zip Code	Transaction ID: INC.A.71424
SUCCASUNNA	NJ	07876	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR THOMAS PIERCE			Date of Receipt
Mailing Address 10297 E. LAKE DR.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.71500
ENGLEWOOD	CO	80111	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABC	n DR RELATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) DR PAGE PIGG			Date of Receipt
Mailing Address 9297 ANGLER TRL			10 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.71160
MECHANICSVILLE	VA	23116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL SVCS	
Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)		0 0 0 0 0 0 0	100.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 259 / 335 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JUDITH PLATKIN Mailing Address 29 BLACKWELL A' City MORRISTOWN FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State Zip Code NJ 07960  C  Occupation SVP & GENERAL MGR Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS JANET PORAT  Mailing Address 5 CRABAPPLE CT	4230.60	Date of Receipt  1 0 2 4 2 0 0 9
City  MONSEY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NY 10952  C  Occupation DIR TECHNOLOGY  Aggregate Year-to-Date	Transaction ID: INC.A.71116  Amount of Each Receipt this Period  25.00
Other (specify) ▼  Full Name (Last, First, Middle Initial) MS LYDIA POTTER  Mailing Address 19642 S.W. 88 LOC  City  DUNNELLON  FEC ID number of contributing	State Zip Code FL 34432	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary  Other (specify)	Occupation DIR OPS  Aggregate Year-to-Date   550.00	25.00
SUBTOTAL of Receipts This Page (optional	J	242.30

MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MS KARIN PRINCIVALLE  Mailing Address 875 ALEXANDRIA CT  City  RAMSEY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	ne and address of any political committee to s	Date of Receipt  M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
MR NEIL PREZIOSO  Mailing Address 10258 WINDSOR WAY  City POWELL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE  Mailing Address 875 ALEXANDRIA CT  City RAMSEY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	OH 43065  C Decupation /P HLTH CARE OPS/FORMULARY/C Aggregate Year-to-Date  1100.00	Transaction ID: INC.A.71268  Amount of Each Receipt this Period  50.00  Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE Mailing Address 875 ALEXANDRIA CT  City RAMSEY  FEC ID number of contributing federal political committee.	Occupation /P HLTH CARE OPS/FORMULARY/C Aggregate Year-to-Date ▼ 1100.00	Date of Receipt  10 24 2009
MS KARIN PRINCIVALLE  Mailing Address 875 ALEXANDRIA CT  City  RAMSEY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State Zip Code	10 / 24 / Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		
Receipt For:	NJ 07446 C	Amount of Each Receipt this Period  192.30
Primary General Other (specify) ▼	SVP HR Aggregate Year-to-Date ▼ 4230.60	_
Full Name (Last, First, Middle Initial)  MR ROBERT PRITCHET  Mailing Address 135 HOLLYBERRY DRIVE	<u> </u>	Date of Receipt
City HOPEWELL JUNCTION	State Zip Code NY 12533	Transaction ID: INC.A.71334  Amount of Each Receipt this Period
MEDOO HEXLTH SOLLITIONS	Occupation	25.00
	SR DIR CONTRACT ADMINISTRATIO Aggregate Year-to-Date ▼ 550.00	7
SUBTOTAL of Receipts This Page (optional)		267.30

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 261 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
0	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MR MARK PROULX	0.4.0		Date of Receipt
	Mailing Address 20 BRANDY RIDGE R			10 24 2009
	City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.71416  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP PH	n ARMACY & CUST SVC OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 4230.82	
- 3.	Full Name (Last, First, Middle Initial) SYED QUADRI			Date of Receipt
	Mailing Address 6040 KENNEDY BLVD APT 30N	EAST		10 24 7 9 9
	City WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC.A.71407  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07030	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRI		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
	Mailing Address 800 SANDY TRAIL			10 24 2009
	City KELLER	State	Zip Code	Transaction ID: INC.A.71441
	FEC ID number of contributing federal political committee.	C	76248	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR HR	n	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1100.00	
Γ,	SUBTOTAL of Receipts This Page (optional)			242.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 262 / 335   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS FRANCES RAO			Date of Receipt
Mailing Address 19 ROSS ROAD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SCARSDALE	State NY	Zip Code 10583	Transaction ID: INC.A.71022
FEC ID number of contributing federal political committee.	C	10000	Amount of Each Receipt this Period  75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R REGULATORY	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 1650.00	
Full Name (Last, First, Middle Initial) MRS DOLORES RAPUANO			Date of Receipt
Mailing Address 57660 BEAVER VA	LLEY RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City QUAKER CITY	State OH	Zip Code 43773	Transaction ID: INC.A.71382  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40770	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n ELIGIBILITY	
Receipt For:  Primary General  Other (specify) ▼	- <del></del>	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MRS MONICA REED			Date of Receipt
Mailing Address 8475 DUNHAM STA	ATION DRIVE		M M / D D / Y Y Y Y Y 1 Y 1 1 0 2 4 2 0 0 9
City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.71209  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00077	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROI		
Receipt For:  Primary General  Other (specify) ▼	- + ·	Year-to-Date ▼ 975.00	
SUBTOTAL of Receipts This Page (optional	al)		150.00

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 263 / 335   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS			Date of Receipt
Mailing Address 204 TOKENEKE F	RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City DARIEN	State CT	Zip Code 06820	Transaction ID: INC.A.71132
FEC ID number of contributing federal political committee.	C	00020	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BIAC		
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MR VICTOR RENNA			Date of Receipt
Mailing Address 8 CARLA ANN CT			M M / D D / Y Y Y Y Y Y 1 1 0 2 4 2 0 0 9
City FLANDERS	State NJ	Zip Code 07836	Transaction ID: INC.A.71379
FEC ID number of contributing federal political committee.	C	07630	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	n CUREMENT & INVENTORY	
Receipt For:  Primary General  Other (specify) ▼	'	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR JOSEPH REYNOLDS			Date of Receipt
Mailing Address 412 RIVER MEWS	SLANE		M M / D D / Y Y Y Y Y Y 1 1 0 2 4 2 0 0 9
City	State	Zip Code	Transaction ID: INC.A.71438
EDGEWATER  FEC ID number of contributing federal political committee.	C	07020	Amount of Each Receipt this Period  70.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1540.00	
SUBTOTAL of Receipts This Page (option	al)		170.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 264 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	C. POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
SUZANNE RICHARDS  Mailing Address 21357 W 115TH TE	ER	Date of Receipt    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OLATHE	State Zip Code KS 66061	Transaction ID: INC.A.71565  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation NATL ACCT MGR PHARM MANUFAGE	<del>-</del> ct
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR DAVID ROBARGE		Date of Receipt
Mailing Address 4565 QUEENSLAN		10 24 2009
City MINNEAPOLIS	State Zip Code MN 55446	Transaction ID: INC.A.71065
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MS TRACEY RODGERS-LENGE		Date of Receipt
Mailing Address 19 FARMINGTON (	COURT	10 24 2009
City RAMSEY	State Zip Code NJ 07446	Transaction ID: INC.A.70995  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
	l)	75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 265 / 335 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person g the name and address of any political committee to so C. POLITICAL ACTION COMMITTEE (a.k.a. N	olicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS SORAYA RODRIGUEZ-BALZAC Mailing Address 22 PAPOOSE TRA  City ANDOVER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	AIL  State Zip Code NJ 07821  C  Occupation DIR PUBLIC AFFAIRS  Aggregate Year-to-Date   550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO Mailing Address 855 CLUB MOSS  City MARIETTA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	CT.  State Zip Code GA 30068  C  Occupation PRESIDENT SYSTEMED  Aggregate Year-to-Date  4230.60	Date of Receipt  M M M / 24 2009  Transaction ID: INC.A.71130  Amount of Each Receipt this Period  192.30
Full Name (Last, First, Middle Initial) DAVID ROOT Mailing Address 212 SPRING BRAI  City WAVERLY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	NCH ROAD  State Zip Code VA 23890  C  Occupation DIR STATE GOVERNMENT AFFAIRS  Aggregate Year-to-Date ▼  550.00	Date of Receipt  M M M / D D / 24 2009  Transaction ID: INC.A.71515  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (option	al)	242.30

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 266 / 335 (check only one)    X
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	o solicit contributions from such committee.
<u>∠</u> 4.	Full Name (Last, First, Middle Initial) MS DONNA ROSEN Mailing Address 7 RED OAK LANE  City KINNELON	State NJ	Zip Code 07405	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.	C	07.100	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼		on -CLINICAL TECH e Year-to-Date ▼ 1100.00	
 3.	Full Name (Last, First, Middle Initial) DR CHRISTINE ROTTAS Mailing Address 7227 RAMOTH DRIVI	E		Date of Receipt  1 0 2 4 2 0 0 9
	City	State	Zip Code	Transaction ID: INC.A.71091
	JACKSONVILLE	FL	32226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	+ +	IR CLINICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
. –	Full Name (Last, First, Middle Initial) MR RICHARD RUBINO			Date of Receipt
	Mailing Address 3 APACHE DRIVE			10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71331
	OAKLAND FEC ID number of contributing federal political committee.	NJ C	07436	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP FIN	n ANCE & CHIEF FIN OFFCR	3
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4246.00	
	SUBTOTAL of Receipts This Page (optional) .	<u> </u>		293.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 267 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	
MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK		Date of Receipt
Mailing Address 21 SKY TOP RIDGE  City	State Zip Code	1 0 2 4 2 0 0 9  Transaction ID: INC.A.71152
OAKLAND	NJ 07436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP CLINICAL MGMT & SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MS KATHERYN RUSSI		Date of Receipt
Mailing Address 5965 VILLAGE CIRC		10 24 2009
City	State Zip Code	Transaction ID: INC.A.71036
JOHNSTON	IA 50131	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR CLINICAL SVCS	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	1100.00	
Full Name (Last, First, Middle Initial) MR ANTHONY RUSSO		Date of Receipt
Mailing Address 66 FINCH RD		10 24 2009
City	State Zip Code	Transaction ID: INC.A.71275
RINGWOOD  FEC ID number of contributing federal political committee.	NJ 07456	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROF PRA	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SURTOTAL of Receipts This Page (optional)		150.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 268 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than u	s and Statements may not be sold or used by any personsing the name and address of any political committee to INC. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JESSE RUZICKA Mailing Address 334 MORRIS A  City BOONTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07005  C  Occupation NATL ACCT EXEC  Aggregate Year-to-Date  660.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MS MARY RYAN  Mailing Address 456 RICHMONE  City  MAPLEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	O AVENUE  State Zip Code NJ 07040  C  Occupation VP PHARMACY REGULATORY Aggregate Year-to-Date  1723.48	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MRS CYNTHEA RYDER  Mailing Address 74 CHOCTAW  City  RINGWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NJ 07456  C  Occupation DIR E-COM STRAT & DELIV  Aggregate Year-to-Date  700.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (opt	ional)	358.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 269 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and ad	dress of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MISS CYNTHIA RYLANDS Mailing Address 4836 MIDDLE RD  City ALLISON PARK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State PA C Occupation DIR BUS	Zip Code 15101	Date of Receipt    M M
Full Name (Last, First, Middle Initial) MR RYAN SADLER  Mailing Address 85 VANCE ST. #201  City MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)		Zip Code 38103  On VERNMENT AFFAIRS  e Year-to-Date  550.00	Date of Receipt  M M Z 4 Z 0 0 9  Transaction ID: INC.A.71523  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  MR MICHAEL SARDONE  Mailing Address 7 AHERN WAY  City  WEST ORANGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	<del>-                                    </del>	Zip Code 07052 on ENTERPRISE BUS INTELLIG e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) a		<u>·</u> _	75.00

	ILE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 270 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for comme	on copied from such Reports and St rcial purposes, other than using the COMMITTEE (In Full) HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.  . Medco Health PAC)
MR MATTI Mailing Ad City RIDGEW FEC ID nu federal pol	imber of contributing litical committee. Employer HEALTH SOLUTIONS	State NJ  C  Occupation VP FINA Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name MS BETH Mailing Ad  City BLAIRS  FEC ID nu federal pol  Name of E MEDCO H  Receipt Fo	er (specify)   (Last, First, Middle Initial) SAVARE Idress 27 JONES LN  TOWN  umber of contributing litical committee.  Employer HEALTH SOLUTIONS or:		Zip Code 07825 n PHARM OPS	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name MR DAVID Mailing Ad  City GLEN R  FEC ID nu federal pol  Name of E MEDCO F  Receipt Fo	er (specify)   (Last, First, Middle Initial) SCHLETT  Idress 339 GRAMERCY PL  OCK  Umber of contributing litical committee.  Employer HEALTH SOLUTIONS  or:		Zip Code 07452  n ANCIAL & ANALYTICAL SV e Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	of Receipts This Page (optional)			125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 2/1/335   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ			Date of Receipt
Mailing Address 9111 N KARLOV			10 24 2009
City	State	Zip Code	Transaction ID: INC.A.71061
SKOKIE  FEC ID number of contributing federal political committee.	C	60076	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) BRUCE SCOTT	<b>I</b>		Date of Receipt
Mailing Address 18650 BEARPATH	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City EDEN PRAIRIE	State MN	Zip Code 55347	Transaction ID: INC.A.71538  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33347	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & C	n HIEF PHARMACIST	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 4230.82	
Full Name (Last, First, Middle Initial) MS CYNTHIA SCOTT			Date of Receipt
Mailing Address 18650 BEARPATH	TRAIL		M M / D D / Y Y Y Y Y 1 1 0 2 4 2 0 0 9
City EDEN PRAIRIE	State MN	Zip Code 55437	Transaction ID: INC.A.70990
FEC ID number of contributing federal political committee.	C	33437	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIN	n ICAL PROG DEV	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optional			292.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 272 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any pene name and address of any political committee  POLITICAL ACTION COMMITTEE (a.k.)	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT Mailing Address 7330 EVEREST LAN		Date of Receipt  M M A Z 4 Z 0 0 9
City	State Zip Code	Transaction ID: INC.A.71381
MAPLE GROVE  FEC ID number of contributing federal political committee.	MN 55311	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date ▼  1100.00	
Full Name (Last, First, Middle Initial) MS MONICA SCOZZARE Mailing Address 3021 E MILLCREEK	ROAD	Date of Receipt  1 0 2 4 2 0 0 9
City	State Zip Code	Transaction ID: INC.A.70980
SALT LAKE CITY	UT 84109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MR ROBERT SENDEWICZ		Date of Receipt
Mailing Address 1220 CROSSING WA		10 DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WAYNE	State Zip Code NJ 07470	Transaction ID: INC.A.71026  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)		125.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 273 / 335 (check only one)    X
or	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV  Mailing Address 66 PROSPECT AVE			Date of Receipt
		0	7' 0 1	10 24 2009
	City WESTWOOD	State NJ	Zip Code 07675	Transaction ID: INC.A.71404  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0.070	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUS	n INESS DEV	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
3.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CREEK	AVF		Date of Receipt
			7.0.1	10 24 2009
	City LAS VEGAS	State NV	Zip Code 89148	Transaction ID: INC.A.71239  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2640.00	
— ;.	Full Name (Last, First, Middle Initial) MR ROBERT SHANNON	1		Date of Receipt
	Mailing Address 59 DANNER AVE			10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71336
	HARRISON FEC ID number of contributing federal political committee.	C	10528	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
	Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
SI	JBTOTAL of Receipts This Page (optional)			135.00
	OTAL This Period (last page this line number			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 274 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	MEDGO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)  MR JOHN SHEA  Mailing Address 62 FRANKLIN TURNP	IKE		Date of Receipt
	City ALLENDALE	State NJ	Zip Code 07401	Transaction ID: INC.A.71002  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST CO		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 880.00	
 3.	Full Name (Last, First, Middle Initial) MR FRANK SHEEHY Mailing Address 119 HAMILTON RD			Date of Receipt
	City	State	Zip Code	1 0 2 4 2 0 0 9  Transaction ID: INC.A.71080
	RIDGEWOOD  FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period  192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	n EENERAL MGR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2768.00	
— ).	Full Name (Last, First, Middle Initial) MR PETER SHERMAN Mailing Address 139 GATES AVENUE			Date of Receipt  10 24 2009
	City MONTCLAIR	State NJ	Zip Code 07042	Transaction ID: INC.A.70973
	FEC ID number of contributing federal political committee.	C	0/042	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio MANAGI	n NG COUNSEL	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
s	UBTOTAL of Receipts This Page (optional)			282.00
T,	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 275 / 335 (check only one)    X
or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES SHIVAS Mailing Address 18 PROSPECT A  City NORTH ARLINGTON FEC ID number of contributing federal political committee.	State Zip Code NJ 07031	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼	Occupation DIR PRICING  Aggregate Year-to-Date   550.00	
Full Name (Last, First, Middle Initial) MR ELWOOD SIDES III Mailing Address 150 CLAREMON	T AVE	Date of Receipt  1 0 2 4 2 0 0 9
City	State Zip Code	Transaction ID: INC.A.71094
LONG BEACH	CA 90803	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) JEFFREY SIMEK		Date of Receipt
Mailing Address 704 SAW PALME	ETTO COURT	10 24 2009
City	State Zip Code	Transaction ID: INC.A.71206
PORT ORANGE  FEC ID number of contributing federal political committee.	FL 32128	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP COMMUNICATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.82	
SUBTOTAL of Receipts This Page (optic	onal)	242.31

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 276 / 335 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR LEE SIMON Mailing Address 2390 GREENVIEW  City NORTHBROOK FEC ID number of contributing federal political committee.  Name of Employer	ROAD State IL C	Zip Code 60062	Date of Receipt    M M
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	GENERA	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR JEFFREY SINKO Mailing Address 10 CHERRY TREE	LANE		Date of Receipt  10 24 2009
City	State	Zip Code	Transaction ID: INC.A.71252
KINNELON FEC ID number of contributing federal political committee.	C	07405	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		TENERAL COUNSEL  Year-to-Date ▼  1100.00	
Full Name (Last, First, Middle Initial) MR WILLIAM SIRICO			Date of Receipt
Mailing Address 564 DALE COURT I	EAST		10 24 7 2009
City	State NJ	Zip Code	Transaction ID: INC.A.71025
RIVER VALE  FEC ID number of contributing federal political committee.	C	07675	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼  660.00	
SUBTOTAL of Receipts This Page (optional	`		130.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 277 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P			
Full Name (Last, First, Middle Initial) MR JOHN SISTO Mailing Address 24 MAYBERRY LANE			Date of Receipt
City MECHANICSBURG	State PA	Zip Code 17050	Transaction ID: INC.A.71316  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼		PHARMACY REGULATORY Year-to-Date   550.00	
Full Name (Last, First, Middle Initial) MR DAVID SITVER Mailing Address 24 YORKSHIRE AVE			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SUFFERN	State NY	Zip Code 10901	Transaction ID: INC.A.71178  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	SR DIR 1	TECHNOLOGY Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) ANN SMITH			Date of Receipt
Mailing Address 437 GLENDALE RD			10 24 2009
City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.71185  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n PUBLIC AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)			75.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	(check only one)				
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by an the name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTION COMMITTEE	(a.k.a. Medco Health PAC)				
Full Name (Last, First, Middle Initial) MR ROBERT SMITH		Date of Receipt				
Mailing Address 40 JOSHUA DR	Mailing Address 40 JOSHUA DR T					
City	State Zip Code	Transaction ID: INC.A.71356				
RAMSEY	NJ 07446	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2768.0	00				
Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR		Date of Receipt				
Mailing Address 23 CEDAR GATE R	OAD	M M / D D / Y Y Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1 1				
City	State Zip Code	Transaction ID: INC.A.71425				
DARIEN	CT 06820	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	192.31				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHAIRMAN & CEO					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	4230.8	32				
Full Name (Last, First, Middle Initial) MR ALAN SOKALER		Date of Receipt				
Mailing Address 30 MICHELLE WAY		10 24 2009				
City	State Zip Code NJ 07058	Transaction ID: INC.A.71462				
PINE BROOK	NJ 07058	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE					
Receipt For:  Primary  General	Aggregate Year-to-Date ▼					
Other (specify)	1100.0	00				

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 279 / 335 (check only one)    X
or for commercial purposes, other than u	ts and Statements may not be sold or used by any persising the name and address of any political committee to INC. POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) BARRY SOUTHERN Mailing Address 3705 MIDDLEB  City GREENSBORO	URY WAY  State Zip Code  NC 27410	Date of Receipt  10 24 2009  Transaction ID: INC.A.71563  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify)	Occupation MGR PHARMACY  Aggregate Year-to-Date   550.00	25.00
Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE Mailing Address 6108 HUNTER  City COLLEYVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code TX 76034  C  Occupation VP/GM  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) BRENDA STAFFORD  Mailing Address 647 BERKELEY  City ORANGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	AVENUE  State Zip Code NJ 07050  C  Occupation ASST COUNSEL  Aggregate Year-to-Date ▼  575.00	Date of Receipt  M M M
SUBTOTAL of Receipts This Page (op	tional)	75.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	· ·	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 280 / 335 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS II	ng the name and addre	ss of any political committee to	
Full Name (Last, First, Middle Initial) BRENDA STAFFORD Mailing Address 647 BERKELEY A	AVENUE		Date of Receipt  10 24 2009
City ORANGE FEC ID number of contributing	State NJ	Zip Code 07050	Transaction ID: INC.A.71541  Amount of Each Receipt this Period  25.00
Receipt For:  Primary  Other (specify)  General	Occupation ASST COU	NSEL ear-to-Date ▼ 575.00	
Full Name (Last, First, Middle Initial)  MR RALPH STAIANO  Mailing Address 1 LAMBROS DRI	VE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  MONROE  FEC ID number of contributing federal political committee.	State NY	Zip Code 10950	Transaction ID: INC.A.70991  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	- <del>   </del>	SINESS REQUIREMENT ear-to-Date ▼ 550.00	s ]
Full Name (Last, First, Middle Initial) PETER STARK Mailing Address 4840 COLE ROA	I		Date of Receipt
City  MEMPHIS  FEC ID number of contributing federal political committee.	State TN	Zip Code 38117	Transaction ID: INC.A.71591  Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼	<del></del>	P MANUF SVCS ear-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optio	nal)		100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 281 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sold.  C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN Mailing Address 7 FOREST LAKE D	DR	Date of Receipt  10 24 2009
City WEST HARRISON FEC ID number of contributing	State Zip Code NY 10604	Transaction ID: INC.A.71332  Amount of Each Receipt this Period  192.31
Receipt For:  Primary  Other (specify)   General	Occupation SVP FINANCIAL & ANALYTICAL SVC Aggregate Year-to-Date  4230.82	_
Full Name (Last, First, Middle Initial) CHANNING STAVE Mailing Address 77 HIGHVIEW AVE	<u> </u>	Date of Receipt
City TUCKAHOE  FEC ID number of contributing federal political committee.	State Zip Code NY 10707	Transaction ID: INC.A.71513  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation SR DIR MARKETING Aggregate Year-to-Date ▼	_
Other (specify) ▼  Full Name (Last, First, Middle Initial)  MS JILL STEARNS	550.00	Date of Receipt
Mailing Address 13130 HALSELL D  City	State Zip Code	1 0 2 4 2 0 0 9  Transaction ID: INC.A.71390
AUSTIN  FEC ID number of contributing federal political committee.	TX 78732	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	1100.00	
SUBTOTAL of Receipts This Page (optional	al)	267.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 282/335   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR CRAIG STEEL			Date of Receipt
Mailing Address 122 DEMAREST A	VENUE		M M / D D / Y Y Y Y Y Y 1 Y 1 D D / Y 2 0 0 9
City EMERSON	State NJ	Zip Code 07630	Transaction ID: INC.A.71120  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	. ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) MS AMY STEINKELLNER	<b>I</b>		Date of Receipt
Mailing Address 1740 HIGHLAND I	DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ELM GROVE	State W1	Zip Code 53122	Transaction ID: INC.A.71168  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30122	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATION	n ONAL PRACTICE LEADER	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) DR GLEN STETTIN			Date of Receipt
Mailing Address 8 MILL GLEN CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.71409  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07430	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/GM	ADVANCED CLINICAL SLT	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 4230.82	
SUBTOTAL of Receipts This Page (option	al)		292.31

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 283 / 335 (check only one)    X   11a
	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR GERARD STOCKER, JR			Date of Receipt
	Mailing Address 80 ALGONQUIN TRL			10 24 2009
	City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.71121
	FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n L ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
В.	Full Name (Last, First, Middle Initial) MS JANNA STOUL Meiling Address A A RACUE MAY	- <b>I</b>		Date of Receipt
	Mailing Address 4 APACHE WAY			10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71012
	MONTVILLE  FEC ID number of contributing federal political committee.	NJ C	07045	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
с. С.	Full Name (Last, First, Middle Initial) MR SCOTT STRATTON			Date of Receipt
	Mailing Address 351 TIMBERLANE DR	RIVE		10 24 2009
	City ORANGE	State CT	Zip Code 06477	Transaction ID: INC.A.71470  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PRO	n DUCT DEVELOPMENT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional) .			125.00
İ	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  Any information copied from such Benorts at	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 284 / 335 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS SUZANNE STREDNAK  Mailing Address 157 WATCHUNG [	DR	Date of Receipt
City	State Zip Code	Transaction ID: INC.A.71066
<u>HAWTHORNE</u>	NJ 07506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MS PATRICIA STRETE		Date of Receipt
Mailing Address 19275 PAVER BAF	RNES ROAD	10 24 2009
City MARYSVILLE	State Zip Code OH 43040	Transaction ID: INC.A.71056  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLINICAL THERAPEUTICS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MILAYNA SUBAR, MD		Date of Receipt
Mailing Address 11 RIVERSIDE DR #8CE	IIVE	10 24 2009
City	State Zip Code	Transaction ID: INC.A.71537
NEW YORK	NY 10023	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATIONAL PRACTICE LEADER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	
SUBTOTAL of Receipts This Page (options	al)	105.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 285 / 335   (check only one)     X
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by any perg the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MS COLEEN SULLIVAN		Date of Receipt
Mailing Address 38 BARKMILL TE	RRACE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MONTVILLE	State Zip Code NJ 07045	Transaction ID: INC.A.71388
FEC ID number of contributing federal political committee.	C 07045	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR MARK SULLIVAN		Date of Receipt
Mailing Address 16025 PINE VALE	PL.	10 24 2009
City MIDLOTHIAN	State Zip Code VA 23113	Transaction ID: INC.A.70999  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 25110	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINESS PROCESS SPECIALIS	<del></del> т
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 930.00	
Full Name (Last, First, Middle Initial) MR FREDERICK SUMNER		Date of Receipt
Mailing Address 808 HOLLYWOOI	O AVENUE	1 0 2 4 2 0 0 9
City HO-HO-KUS	State Zip Code NJ 07423	Transaction ID: INC.A.71075
FEC ID number of contributing federal political committee.	C 07425	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PROJECT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (option	al)	100.00
TOTAL This Period (last page this line nur	mber only)	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 286 / 335 (check only one)    X
C	Any information copied from such Reports and Sur for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.K.a	a. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MS IRENE SUTTON Mailing Address 20 AVENUE @ PORT	IMPEDIAL		Date of Receipt
	Mailing Address 20 AVENUE @ PORT APT 209	IMPERIAL		10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71084
	WEST NEW YORK	NJ	07093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		880.00	
_	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt
	Mailing Address 8362 GOLDEN PRAIF	RIE DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.71129
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		2200.00	
_	Full Name (Last, First, Middle Initial) MR NICHOLAS TAYLOR			Date of Receipt
	Mailing Address 4241 CHADBOURNE	DRIVE		10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.71417
	UPPER ARLINGTON	OH	43220	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CLIN	n NICAL SVCS	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼	0 0	550.00	]
Г		1		115.00

	ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 287/335   (check only one)
Any information for for comm	ation copied from such Reports and S nercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
\	OF COMMITTEE (In Full) O HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	ne (Last, First, Middle Initial) DBALAN THANGAVELU			Date of Receipt
Mailing A	Address 13 BIRCH TERRACE			10 24 2009
City MT AR	RLINGTON	State NJ	Zip Code 07856	Transaction ID: INC.A.71447  Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C		25.00
Name of MEDCC	f Employer O HEALTH SOLUTIONS	Occupatio TECHNIC	n CAL SPECIALIST	
	For: rimary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	ne (Last, First, Middle Initial) INDA THIEL			Date of Receipt
Mailing A	Address 27 GARVEY ROAD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <b>WAY</b> N	IF.	State NJ	Zip Code 07470	Transaction ID: INC.A.71093  Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C	07470	25.00
Name of MEDCC	f Employer O HEALTH SOLUTIONS	Occupatio SR DIR I	n PRODUCT MGMT	
	For: rimary General ther (specify) ▼	+ +	e Year-to-Date ▼ 550.00	
	ne (Last, First, Middle Initial) ISSA THOMET			Date of Receipt
	Address 721 HINMAN AVE #1E			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City EVANS		State IL	Zip Code 60202	Transaction ID: INC.A.71007  Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C	00000	25.00
Name of MEDCC	f Employer ) HEALTH SOLUTIONS	Occupatio SR DIR	n ACCT MGMT OPS	
	For: rimary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
SUBTOTA	<b>AL</b> of Receipts This Page (optional)		<b>_</b>	75.00

ITEMIZED RECEIPTS	3A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 288 / 335   (check only one)			
Any information copied from such Reports or for commercial purposes, other than us	and Statements may ing the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	INC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Full Name (Last, First, Middle Initial) MS MARY THORSBY			Date of Receipt			
Mailing Address 17326 ELLEN DI	Mailing Address 17326 ELLEN DR					
City LIVONIA	State MI	Zip Code	Transaction ID: INC.A.71147			
FEC ID number of contributing federal political committee.	C	48152	Amount of Each Receipt this Period  75.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n - ACCT EXEC				
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 1650.00				
Full Name (Last, First, Middle Initial) DREW THRAEN			Date of Receipt			
Mailing Address 63 STILES AVE			10 24 YYYYY			
City MORRIS PLAINS	State NJ	Zip Code 07950	Transaction ID: INC.A.71506  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	07330	25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS					
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 525.00				
Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN			Date of Receipt			
Mailing Address 838 COLONIAL	RD		M M / D D / Y Y Y Y Y 1 1 0 2 4 2 0 0 9			
City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.71014			
FEC ID number of contributing federal political committee.	C	0/41/	Amount of Each Receipt this Period  50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BENE	n EFIT SYSTEMS SUPPORT				
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00				
SUBTOTAL of Receipts This Page (option	onal)		150.00			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 289 / 335 (check only one)    X
A	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Po	name and add	dress of any political committee to	o solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) MR DAVID TRICE Mailing Address 150 BRADFORD DR.  City SCHWENKSVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (consist) and General		Zip Code 19473 on CAL SPECIALIST e Year-to-Date ▼	Date of Receipt    M M M
<b>_</b>	Other (specify) ▼  Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER  Mailing Address 713 INDIAN CREEK RD  City Sta  AMHERST VA  FEC ID number of contributing federal political committee.  Name of Employer Occu		Zip Code 24521	Date of Receipt  10 24 2009  Transaction ID: INC.A.71246  Amount of Each Receipt this Period  60.00
 C.	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR GARY TULLY  Mailing Address 16 FIFE DUEDOE DRIVE	Aggregate	GOVERNMENT AFFAIRS  e Year-to-Date ▼  2245.00	Date of Receipt
	Mailing Address 16 FIELDHEDGE DRIV  City HILLSBOROUGH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	State NJ  C  Occupatio DIR CLIE	Zip Code 08844  on ENT SVC DELIVERY e Year-to-Date ▼ 660.00	Transaction ID: INC.A.71396  Amount of Each Receipt this Period  30.00
5	SUBTOTAL of Receipts This Page (optional)			115.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for eac	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 290 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and address of a	ny political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JEFFREY TYLER Mailing Address 37 KNOLL TERRACE  City HAZLET  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip 0 NJ 0773  C  Occupation SR DIR TECHNO Aggregate Year-to-D	DLOGY	Date of Receipt  10 24 2009  Transaction ID: INC.A.71200  Amount of Each Receipt this Period  30.77
Full Name (Last, First, Middle Initial) MR KEITH URICH Mailing Address 12495 SOUTH 1745 E  City DRAPER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip C UT 8402  C Occupation	Code	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MRS JENNIFER UTTERDYKE  Mailing Address 1881 GREENTREE R  City	Aggregate Year-to-E		Date of Receipt  10 / 24 / 2009  Transaction ID: INC.A.71100
LEBANON FEC ID number of contributing federal political committee.	OH 4503	36	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation DIR PHARM PRA Aggregate Year-to-E		
SUBTOTAL of Receipts This Page (optional) .		<b>)</b>	105.77

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 291 / 335 (check only one)    X
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS CARA VAN ZILE			Date of Receipt
	Mailing Address 31 LINCOLN RD			10 24 2009
	City <u>KINNELON</u>	State NJ	Zip Code 07405	Transaction ID: INC.A.71141  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR ANALYTICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
- В.	Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA Mailing Address MARCA SARRING	DIDOE		Date of Receipt
	Mailing Address W328 S4230 SPRING	10 24 2009		
	City WAUKESHA	State WI	Zip Code 53189	Transaction ID: INC.A.71558  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n GENERAL MGR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2476.00	
- С.	Full Name (Last, First, Middle Initial) MRS JEANNINE VANKLEECK	Date of Receipt		
	Mailing Address 56 ZIMMER AVENUE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City MIDLAND PARK	State NJ	Zip Code 07432	Transaction ID: INC.A.71035  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07.102	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA	n ANCIAL APPLICATIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional) .	1		267.00
T	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 292 / 335 (check only one)    X   11a			
or for commercial purposes, other than usi	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS I	NC. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS Mailing Address 105 ARRANDALE	- PD	Date of Receipt			
		10 24 2009			
City ROCKVILLE CENTRE	State Zip Code NY 11570	Transaction ID: INC.A.71237			
FEC ID number of contributing federal political committee.	NY 11570	Amount of Each Receipt this Period  50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTING				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00				
Full Name (Last, First, Middle Initial) MR WIL VELARDE		Date of Receipt			
Mailing Address 443 WEST SADE	Mailing Address 443 WEST SADDLE RIVER RD				
City	State Zip Code	Transaction ID: INC.A.71082			
UPPER SADDLE RIVER	NJ 07458	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	30.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00				
Full Name (Last, First, Middle Initial) MR JEFFREY VERNICE	· · · · · · · · · · · · · · · · · · ·				
UNIT #17	UNIT #17				
City BLOOMFIELD	State Zip Code NJ 07003	Transaction ID: INC.A.71078  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MEDICAL				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00				
SUBTOTAL of Receipts This Page (optic	onal)	105.00			
TOTAL This Period (last page this line no	umber only)				

Any information copied from such Reports a		Detailed Summary Page	X   11a   11b   11c   12   15   16   1
or recommendation parposes, earlier triair den	and Statements may r	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL AC	CTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GORDON VICKERS			Date of Receipt
Mailing Address 436 MOUNTAIN A	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City WESTFIELD	State NJ	Zip Code 07090	Transaction ID: INC.A.70970
FEC ID number of contributing federal political committee.	C	07090	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACC	CT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR MUNISH VIJ			Date of Receipt
Mailing Address 11 BOULDER TR	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.71449  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0,140	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	AL SPECIALIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR STEVEN VREELAND	I		Date of Receipt
Mailing Address 19 ANNA STREE	10 24 2009		
City DENVILLE	State NJ	Zip Code 07834	Transaction ID: INC.A.71484  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07007	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECH	INOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (option	nal)		75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each	parate schedule(s) n category of the d Summary Page	FOR LINE NUMBER: PAGE 294 / 335 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	the name and address of any	y political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS ANNETTE WAGNER  Mailing Address 8 INDIAN RUN RO  City	AD State Zip Co	ode	Date of Receipt    M M
LONG VALLEY  FEC ID number of contributing federal political committee.	NJ 07853		Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR TECHNOL Aggregate Year-to-Da		
Full Name (Last, First, Middle Initial)  MR DANIEL WALDEN  Mailing Address 450 BEECHMONT	DR		Date of Receipt  10 24 2009
City	State Zip Co	ode	Transaction ID: INC.A.71306
NEW ROCHELLE	NY 10804	1	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.31
Name of Employer MEDCO HEALTH SOLUTIONS		RY & MC PROGRA	MS
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	4230.82	
Full Name (Last, First, Middle Initial) MS THERESE WALKER	•		Date of Receipt
Mailing Address 363 MULBERRY C	Т		10 24 2009
City	State Zip Co		Transaction ID: INC.A.70988
WYCKOFF  FEC ID number of contributing federal political committee.	NJ 07481		Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PRODUCT	T MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	550.00	
SUBTOTAL of Receipts This Page (options	l)l		242.31

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a     11b     11c   12     15   16     17     15     16     17     17     17     18			
or for commercial purposes, other than  NAME OF COMMITTEE (In Full)	ts and Statements may not be sold or used by any persusing the name and address of any political committee to SINC. POLITICAL ACTION COMMITTEE (a.k.	o solicit contributions from such committee.			
Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE	THO. I GETTONE NOTION COMMITTEE (a.i.v.	Date of Receipt			
Mailing Address 5445 GOODW		10 24 YYYYY			
City DALLAS	State Zip Code TX 75206	Transaction ID: INC.A.71452			
FEC ID number of contributing federal political committee.	C 75206	Amount of Each Receipt this Period 192.31			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES SEGMENT LEADER				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.82				
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE Mailing Address 5 APPLE ORC	HARD RD	Date of Receipt			
		10 24 2009			
City MOORESTOWN	State Zip Code NJ 08057	Transaction ID: INC.A.71254  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00				
Full Name (Last, First, Middle Initial) MS CATHERINE WASSON					
Mailing Address 3912 CALLE A	Mailing Address 3912 CALLE ANDALUCIA				
City	State Zip Code	1 0 2 4 2 0 0 9  Transaction ID: INC.A.71017			
SAN CLEMENTE  FEC ID number of contributing federal political committee.	CA 92673	Amount of Each Receipt this Period 50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATL ACCTS				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00				
SUBTOTAL of Receipts This Page (or	tional)	292.31			

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 296 / 335   (check only one)     X
Any in	nformation copied from such Reports and S commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\ \	AME OF COMMITTEE (In Full) IEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	ıll Name (Last, First, Middle Initial) S BEVERLY WATSON			Date of Receipt
M	ailing Address 2 MICHELANGELO Co	10 24 2009		
Ci S	ty OMERSET	State NJ	Zip Code 08873	Transaction ID: INC.A.71298  Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	00070	25.00
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio DIR BEN	n IEFIT DELIVERY SYSTEMS	
Re	eceipt For: Primary General Other (specify)	. '	e Year-to-Date ▼ 550.00	
	ull Name (Last, First, Middle Initial)	Date of Receipt		
_	ailing Address 10180 HERONS NES	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Ci	ty AKELAND	State TN	Zip Code 38002	Transaction ID: INC.A.71605
FE	EC ID number of contributing deral political committee.	C	30002	Amount of Each Receipt this Period  25.00
Na A	ame of Employer CCREDO HEALTH GROUP	Occupatio DIR MAF		
Re	eceipt For: Primary General Other (specify)		e Year-to-Date ▼ 550.00	
FL	ull Name (Last, First, Middle Initial) RS KELLY WEBBER			Date of Receipt
	ailing Address 107 UPPER SADDLE	M M / D D / Y Y Y Y Y 1 1 0 2 4 2 0 0 9		
Ci	ty IONTVALE	State NJ	Zip Code 07645	Transaction ID: INC.A.71226  Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	07043	100.00
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio VP COR		
Re	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2200.00	
SUB	TOTAL of Receipts This Page (optional)		<b>_</b>	150.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 297/335   (check only one)     X   11a     11b     11c   12     13     14     15     16     1			
Any information copied from such Reports or for commercial purposes, other than usir	and Statements may not be sold or used by any p	erson for the purpose of soliciting contributions ee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL ACTION COMMITTEE (a	.k.a. Medco Health PAC)			
Full Name (Last, First, Middle Initial) MARK WEGRYN		Date of Receipt			
	Mailing Address 1717 DYMOKE DRIVE				
City COLLIERVILLE	State Zip Code TN 38017	Transaction ID: INC.A.71184  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer ACCREDO HEALTH GROUP	Occupation AVP QA AND PRODUCT INTEGR	RATION			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00				
Full Name (Last, First, Middle Initial) LOWELL WEINER	I	Date of Receipt			
Mailing Address 1 BURGESS COL	10 24 2009				
City WESTFIELD	State Zip Code NJ 07090	Transaction ID: INC.A.71511  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP COMMUNICATIONS				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	•			
Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH	I	Date of Receipt			
Mailing Address 309 WATERVIEW	10 24 2009				
City FRANKLIN LAKES	State Zip Code NJ 07417	Transaction ID: INC.A.71110  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	192.31			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP PRES EMPLOYER GRO	DUP			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.82				
SUBTOTAL of Receipts This Page (option	nal\	267.31			

SCHEDULE A (FEC Form STEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 298 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 11	
or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any personing the name and address of any political committee to NC. POLITICAL ACTION COMMITTEE (a.k.a.)	on for the purpose of soliciting contributions solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) MR KENNETH WERMES Mailing Address 26037 N WRANG	GLER RD	Date of Receipt  10 24 2009	
City	State Zip Code	Transaction ID: INC.A.71212	
SCOTTSDALE	AZ 85255	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	100.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1725.00		
Full Name (Last, First, Middle Initial) MR PETER WHITE	<u> </u>	Date of Receipt	
Mailing Address 2241 E. PINCHO #17F		10 24 2009	
City PHOENIX	State Zip Code AZ 85016	Transaction ID: INC.A.71000	
FEC ID number of contributing federal political committee.	C 83010	Amount of Each Receipt this Period  25.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT OPS		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		
Full Name (Last, First, Middle Initial) MRS TAMARA WHITLEY Mailing Address 5847 CLENDENI	MRS TAMARA WHITLEY		
City	State Zip Code	Transaction ID: INC.A.70981	
DALLAS	TX 75228	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	25.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS REQUIREMENTS	S	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		
OUDTOTAL (D TI: D / .:	onal)	150.00	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 299 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any personderss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER WILSON Mailing Address 2 TIFFANY ROAD			Date of Receipt
		0	7. 0. 1	10 24 2009
	City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.71181  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0,000	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKT		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
- В.	Full Name (Last, First, Middle Initial) MS COLETTE WILSON	1		Date of Receipt
	Mailing Address 16608 56TH PL W	10 24 2009		
	City	State	Zip Code	Transaction ID: INC.A.71115
	LYNNWOOD	WA	98037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		L ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
с. С.	Full Name (Last, First, Middle Initial) MS BEVERLY WINKLER	Date of Receipt		
	Mailing Address 17 LYNWOOD RD	10 24 YYYY 2009		
	City VERONA	State NJ	Zip Code 07044	Transaction ID: INC.A.71329  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0,011	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n ORG DEV	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
f	TOTAL This Period (last page this line number	onlv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 300 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MICHAEL WISNIEWSKI			Date of Receipt
Mailing Address 23 DRUID HILL DR			10 24 2009
City	State	Zip Code	Transaction ID: INC.A.71389
PARSIPPANY	NJ	07054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n CONTRACT ADMINISTRATI	ON
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR STEPHEN WOGEN			Date of Receipt
Mailing Address 145 WAUGHAW ROAL	M M / D D / Y Y Y Y Y Y Y Y 1 0 2 4 2 0 0 9		
City	State	Zip Code	Transaction ID: INC.A.71123
TOWACO	NJ	07082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP FIN	n ANCIAL & ANALYTICAL SVO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH			Date of Receipt
Mailing Address 43 AZALEA PLACE			10 24 2009
City	State	Zip Code	Transaction ID: INC.A.71015
PISCATAWAY	NJ	08854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 660.00	
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	105.00

TOTAL This Period (last page this line number only) .....

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 301 / 335 (check only one)    X
or fo	information copied from such Reports and S r commercial purposes, other than using the IAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
F fe	iull Name (Last, First, Middle Initial)  MS ANNA WONG  Mailing Address 64-20 BELL BLVD  City  BAYSIDE  EC ID number of contributing ederal political committee.  Idame of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General		Zip Code 11364  n RED SOLUTIONS e Year-to-Date ▼	Date of Receipt    M M
N N	Other (specify)   full Name (Last, First, Middle Initial)  MS JUDITH WOOD  Mailing Address 76 COLONIAL ROAD  Sity	State	1100.00 Zip Code	Date of Receipt  10 24 2009  Transaction ID: INC.A.71383
F fe N	STILLWATER  SEC ID number of contributing ederal political committee.  Jame of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		n ACCT MGMT OPS  P Year-to-Date ▼  550.00	Amount of Each Receipt this Period  25.00
. <u>E</u> M C <u>C</u> F	Full Name (Last, First, Middle Initial) BRENDA WRIGHT Mailing Address 1834 HUNTERS CREE City BERMANTOWN FEC ID number of contributing ederal political committee.	State TN	Zip Code 38138	Date of Receipt  M M M / D D / 2 4 2 0 0 9  Transaction ID: INC.A.71576  Amount of Each Receipt this Period  50.00
_	lame of Employer ACCREDO HEALTH GROUP Receipt For:  Primary General Other (specify) ▼		LITY INTEGRITY HEALTH  Year-to-Date   1100.00	
SUI	BTOTAL of Receipts This Page (optional)			125.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 302 / 335 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR SERGEY YANITSKIY			Date of Receipt
	Mailing Address 793 LINCOLN AVE			10 24 2009
	City POMPTON LAKES	State NJ	Zip Code	Transaction ID: INC.A.71074
	FEC ID number of contributing federal political committee.	C	07442	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
- В.	Full Name (Last, First, Middle Initial) MS SARAH YINGLING			Date of Receipt
	Mailing Address 901 ST MARKS AVE			10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71195
	WESTFIELD	NJ	07090	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n MEDICARE OPS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		550.00	
С. С.	Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR			Date of Receipt
	Mailing Address 219 SPOOK ROCK R	D.		10 24 2009
	City SUFFERN	State NY	Zip Code 10901	Transaction ID: INC.A.71284
	FEC ID number of contributing federal political committee.	C	10901	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & C	n CHIEF INFO OFFICER	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional) .			100.00
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 303 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS JILL ZELMAN			Date of Receipt
	Mailing Address 43604 EMERALD DU	NES PL		10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71348
	LEESBURG	VA	20176	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n CONSOLIDATION PLAN	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
В.	Full Name (Last, First, Middle Initial) ANATOLY ZHELEZNYAK			Date of Receipt
	Mailing Address 5 DENISE COURT			10 24 2009
	City	State	Zip Code	Transaction ID: INC.A.71431
	MANALAPAN	NJ	07726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST	
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify)	0 0	550.00	
с.	Full Name (Last, First, Middle Initial) ANDREA ZICCARELLI	<u>'</u>		Date of Receipt
	Mailing Address 6550 HERONWOOD			10 24 7 2009
	City MEMPHIS	State TN	Zip Code 38119	Transaction ID: INC.A.71092
	FEC ID number of contributing federal political committee.	C	30119	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	n L ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	<del>, '</del>	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional) .	1		100.00
ŀ	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 304 / 335 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. If	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI Mailing Address 6691 DEERVIEW DRI  City LOVELAND FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State OH C Occupation VP/GM	e Year-to-Date ▼	Date of Receipt  M M M 24 2009  Transaction ID: INC.A.71165  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR ANTHONY ZOLFO Mailing Address 726 HIGH MOUNTAIN  City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	State NJ  C  Occupation ASST CC		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO  Mailing Address 26 DAYLILY DRIVE  City  MOUNT LAUREL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State NJ C Occupation DIR HR Aggregate	Zip Code 08054 n • Year-to-Date ▼	Date of Receipt  M M M / D D / 2009  Transaction ID: INC.A.72154  Amount of Each Receipt this Period  15.00
SUBTOTAL of Receipts This Page (optional)			65.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 305 / 335 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	he name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 6527 SHORBURGH  City INDIANAPOLIS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State IN C Occupation DIR PHA	Zip Code 46278  n IRM PRACTICE	Date of Receipt  M M M J D D J D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR BARRY CESANEK  Mailing Address 5 LEXINGTON CT	0 0	1100.00	Date of Receipt  10 31 2009
City SHAMONG  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C Occupation DIR PHA	Zip Code 08088  n RM PRACTICE	Transaction ID: INC.A.71879  Amount of Each Receipt this Period  12.50
Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR JASON COLE	1 1	Year-to-Date ▼ 550.00	Date of Receipt
Mailing Address 14917 E BELLA VISTORIUS  City  VERADALE  FEC ID number of contributing federal political committee.	State WA	Zip Code 99037	Transaction ID: INC.A.71849  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupation VP/GM Aggregate	Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optional)	1		62.50

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	. — —	
or for comme	on copied from such Reports and Sercial purposes, other than using the COMMITTEE (In Full)  HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	on for the purpose of solicit contribution	of soliciting contributions s from such committee.
		POLITICAL /	ACTION COMMITTEE (a.k.a	I. Medco Health	
MR KENN	e (Last, First, Middle Initial) ETH DANIELS			Date of Rece	eipt
Mailing A	ddress 4156 DUNMORE DRI	VE		10	31 2009
City	/AL FO	State	Zip Code		ID: INC.A.71934
LAKE W		FL	33859	Amount of E	ach Receipt this Period
	umber of contributing litical committee.	C			25.00
Name of I MEDCO	Employer HEALTH SOLUTIONS	Occupatio VP/GM	n		
	or: nary General er (specify) ♥		e Year-to-Date ▼ 1100.00		
	e (Last, First, Middle Initial) PH FRENDO			Date of Rece	eipt
Mailing A	ddress 9 GREEN HILL TRAIL	-		1 0 /	31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction	ID: INC.A.71938
<u>TROPH</u>	Y CLUB	TX	76262	Amount of E	ach Receipt this Period
	umber of contributing litical committee.	C			50.00
Name of I MEDCO	Employer HEALTH SOLUTIONS	Occupatio VP NATI	n ONAL SERVICE CENTER		
	or: nary General er (specify) ♥	Aggregate	e Year-to-Date ▼ 2200.00		
	e (Last, First, Middle Initial) ERT GIBBS			Date of Rece	eipt
Mailing A	ddress 544 DENMOOR COU	RT		10	31 2009
City	4/45/	State	Zip Code		ID: INC.A.71697
	umber of contributing litical committee.	OH C	43119	Amount of E	ach Receipt this Period
Name of I MEDCO	Employer HEALTH SOLUTIONS	Occupatio DIR PHA	n IRM PRACTICE		
	nary General		e Year-to-Date ▼	1	
Oth	er (specify) ▼		550.00	1	
	of Receipts This Page (optional)				87.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 30//335   (check only one)
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
Mailing Address 12224 MONTCALN	1 STREET		10 31 2009
City CARMEL	State IN	Zip Code 46032	Transaction ID: INC.A.72002  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) MR BRICE LOVE			Date of Receipt
Mailing Address 2390 BRANDON R	D		10 31 2009
City COLUMBUS	State OH	Zip Code 43221	Transaction ID: INC.A.71854  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	TOLL	12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n .RM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt
Mailing Address 1066 WEST GROV	'E CT		10 31 2009
City GIBSONIA	State PA	Zip Code 15044	Transaction ID: INC.A.71762  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13077	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 1320.00	
SUBTOTAL of Receipts This Page (optional	al)		67.50

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 308 / 335 (check only one)    X   11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MRS CATHY PATTEN			Date of Receipt
	Mailing Address 2001 MEADOWS AV	ENUE		10 31 4 2009
	City LANTANA	State TX	Zip Code 76226	Transaction ID: INC.A.71919
	FEC ID number of contributing federal political committee.	C	70220	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
В.	Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS  Mailing Address 2780 FOLKSTONE R	OAD		Date of Receipt
				10 31 2009
	City COLUMBUS	State OH	Zip Code 43220	Transaction ID: INC.A.71719  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
С.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
	Mailing Address 800 SANDY TRAIL			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City KELLER	State TX	Zip Code 76248	Transaction ID: INC.A.72100  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	702-10	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	on	
	Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional) .	1		75.00
Ì	TOTAL This Period (last page this line numbe	r only)	·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 309 / 335 (check only one)    X				
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)				
<b>4</b> .	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III	( A) /F		Date of Receipt				
	Mailing Address 266 BRUSHY CREEK	AVE		10 31 2009				
	City	State	Zip Code	Transaction ID: INC.A.71899				
	LAS VEGAS	NV	89148	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		60.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼	0 0	2640.00					
	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE			Date of Receipt				
	Mailing Address 6108 HUNTER LANE			10 / 31 / 2009				
	City	State	Zip Code	Transaction ID: INC.A.71930				
	COLLEYVILLE	TX	76034	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM						
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	_				
	Other (specify)		1100.00					
	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt				
	Mailing Address 8362 GOLDEN PRAII	RIE DRIVE		10 31 7 2009				
	City	State	Zip Code	Transaction ID: INC.A.71788				
	TAMPA	<u>FL</u>	33647	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n					
	Receipt For:	Aggregate	e Year-to-Date ▼	_				
	Primary General Other (specify) ▼	0 0	2200.00					
	SUBTOTAL of Receipts This Page (optional) .	1		135.00				

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each ca	ate schedule(s) ategory of the ummary Page	FOR LINE NUMBER: PAGE 310 / 335 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	g the name and address of any po	olitical committee to	solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS II	IC. POLITICAL ACTION CO	MMII IEE (a.k.a.	. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MRS JENNIFER UTTERDYKE			Date of Receipt
Mailing Address 1881 GREENTRE			10 31 2009
City <u>LEBANON</u>	State Zip Code OH 45036		Transaction ID: INC.A.71759  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACT	ICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	600.00	
Full Name (Last, First, Middle Initial)  MR CALVIN WASDYKE  Mailing Address			Date of Receipt
Mailing Address 5 APPLE ORCHA			10 31 2009
City MOORESTOWN	State Zip Code NJ 08057		Transaction ID: INC.A.71914  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	2200.00	
Full Name (Last, First, Middle Initial)  MR JAMES ZIRPOLI  Mailing Address 6691 DEERVIEW	DRIVE		Date of Receipt
City	State Zip Code		1 0 3 1 2 0 0 9  Transaction ID: INC.A.71825
LOVELAND	OH 45140		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	1100.00	
SUBTOTAL of Receipts This Page (option	al)		125.00
TOTAL This Period (last page this line nu	mber only)	<b>&gt;</b>	68436.36

A.

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		OR LINI	E NUMBE	R:		PAGE 311/335							
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	-	22 28a	23		24 28c	F	25 29	26 30b				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										5				
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMI	TTEE (	(a.k.a.	Medco F	lealth	PA	C)							
Full Name (Last, First, Middle Initial) NIELSEN, MERKSAMER, PARRINELLO, Mailing Address 1415 L STREET, STE, 12	Transaction ID: EXP.B.69609 Date of Disbursement  10 13 7 2009													
				Amount of Each Disbursement this Period										
	State Zip Code CA 95814			Amou	int of Ea	ach	Disburse	-						
Purpose of Disbursement LEGAL & ACCOUNTING SERVICES		00	_					. 3	321.00					
Candidate Name		Cateo Typ												
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)													
Full Name (Last, First, Middle Initial) NIELSEN, MERKSAMER, PARRINELLO, M	MUELLER, & NAYLOR,	LLP			action of Disbu		EXP.I	B.69	9611					
Mailing Address 1415 L STREET, STE. 12	200			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$										
•	State Zip Code CA 95814			Amou	int of Ea	ach	Disburs	-						
Purpose of Disbursement LEGAL & ACCOUNTING SERVICES		00	)1	406.00										
Candidate Name		Cateo Typ												
Senate President	ment For: Primary General Other (specify)													
State: District: Full Name (Last, First, Middle Initial)														
NIELSEN, MERKSAMER, PARRINELLO, N	MUELLER, & NAYLOR,	LLP		Date	action of Disbu	urse				V				
Mailing Address 1415 L STREET, STE. 12	200			1 0		1	3 /	2	2 o ŏ s	9				
	State Zip Code CA 95814			Amou	int of Ea	ach	Disburse	emer	nt this I	Period				
Purpose of Disbursement LEGAL & ACCOUNTING SERVICES		00	11	L.	-			.3	394.00	)				
Candidate Name		Cate Typ	gory/											
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼													
State: District:	• • • •													
SUBTOTAL of Disbursements This Page (optional) .								11	21.00					

1121.00

TOTAL This Period (last page this line number only) .....

	CHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	FOR LINI (check or	E NUMBER: PAGE 312 / 335
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22   X 23   24   25   26   28a   28b   28c   29   30
	ny Information copied from such Reports and Stater for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMI	TTEE (a.k.a.	Medco Health PAC)
	Full Name (Last, First, Middle Initial) RYAN FOR CONGRESS  Mailing Address P.O. BOX 1919			Transaction ID: EXP.B.68958 Date of Disbursement
	City	State Zip Code		Amount of Each Disbursement this Period
	JANESVILLE Purpose of Disbursement	WI 53547		1000.00
	Candidate Name PAUL D. RYAN		011 Category/ Type	
		ement For: 2010 Primary General Other (specify)		
	Full Name (Last, First, Middle Initial) ADLER FOR CONGRESS			Transaction ID: EXP.B.69600 Date of Disbursement
	Mailing Address 14 KNIGHTSWOOD DR	IVE		M M / D D 7 / Y Y O O 9 Y
	City MARLTON	State Zip Code NJ 08053		Amount of Each Disbursement this Period
	Purpose of Disbursement  Candidate Name JOHN H. ADLER		011 Category/ Type	1000.00
	X X	ement For: 2010 Primary General Other (specify)		
•	Full Name (Last, First, Middle Initial) ALLYSON SCHWARTZ FOR CONGRESS	8		Transaction ID: EXP.B.69601 Date of Disbursement
	Mailing Address P.O. BOX 2232			M M / D D 7 / Y 2 0 0 9 Y
	City JENKINTOWN	State Zip Code PA 19046		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	1000.00
	Candidate Name ALLYSON Y. SCHWARTZ		Category/ Type	
	X X	ement For: 2010 Primary General Other (specify)		
	SUBTOTAL of Disbursements This Page (optional)			3000.00
Г	OTAL This Period (last page this line number only			
L'	The remote that page this line number only	,		

Any Information copied from such Reports and Statement or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLITIONS INC. POLITIONS FULL NAME (Last, First, Middle Initial)  FRIENDS FOR HARRY REID  Mailing Address PO BOX 19163  City State LAS VEGAS NV Purpose of Disbursement  Candidate Name HARRY REID  Office Sought: House Senate Pr	te Zip ( / 891	code 132  2010  General	committee to so	22 X 23 24 25 29 28 28b 28c 29 for the purpose of soliciting contributions contributions from such committee
or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLITICE  Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID  Mailing Address PO BOX 19163  City State LAS VEGAS NV Purpose of Disbursement  Candidate Name HARRY REID  Office Sought: House X Senate President State: NV District:	te Zip ( / 891	Code 132  2010 General	O11 Category/	Medco Health PAC)  Transaction ID: EXP.B.69599 Date of Disbursement  M M / D D 7 / Y Y O Y Y  Amount of Each Disbursement this Period  5000.00
MEDCO HEALTH SOLUTIONS INC. POLITIC  Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID  Mailing Address PO BOX 19163  City Stat LAS VEGAS NV  Purpose of Disbursement  Candidate Name HARRY REID  Office Sought: House X Senate President Ot State: NV District:	te Zip 0 / 891  Int For: rimary X ther (specify)	Code 132 2010 General	011 Category/	Transaction ID: EXP.B.69599 Date of Disbursement  M M M / D D T / Y Y O Y Y  Amount of Each Disbursement this Period  5000.00
FRIENDS FOR HARRY REID  Mailing Address PO BOX 19163  City State LAS VEGAS NV  Purpose of Disbursement  Candidate Name HARRY REID  Office Sought: House X Senate President President Otto	nt For: rimary X ther (specify)	2010 General	Category/	Date of Disbursement  M M M / D D D / Y Y Y O Y 9  Amount of Each Disbursement this Period  5000.00
City State LAS VEGAS NV Purpose of Disbursement  Candidate Name HARRY REID  Office Sought: House X Senate President President  State: NV District:	nt For: rimary X ther (specify)	2010 General	Category/	5000.00
LAS VEGAS  Purpose of Disbursement  Candidate Name HARRY REID  Office Sought:    House   Disbursement	nt For: rimary X ther (specify)	2010 General	Category/	5000.00
Candidate Name HARRY REID  Office Sought:    House   Disbursement   President   Ot   State: NV District:	rimary X ther (specify)	General ▼	Category/	
HARRY REID  Office Sought:    House   Disbursement   President   Otter	rimary X ther (specify)	General ▼	Category/	Transaction ID: EXP B 69597
X Senate Pr President Ot State: NV District:	rimary X ther (specify)	General ▼		Transaction ID: EXP B 69597
Full Name (Last, First, Middle Initial)	DERAL ACC	OUNT		Transaction ID: EXP B 69597
	DERAL ACC	OUNT		Transaction is: Ext .B.00007
NEVADA STATE DEMOCRATIC PARTY FED		00.11		Date of Disbursement
Mailing Address 409 HORN STREET				$\begin{array}{c c} & & & \\ & & & \\ & & & \\ \end{array} \begin{array}{c} & & \\ & \\ \end{array} \begin{array}{c} & & \\ & \\ \end{array} \begin{array}{c} & & \\ \end{array} \begin{array}{c} & & \\ \end{array} \begin{array}{c} & & \\ & \\ \end{array} \begin{array}{c} & & \\ \end{array} \begin{array}{c} & & \\ & \\ \end{array} \begin{array}{c} & & \\ & \\ \end{array} \begin{array}{c} & & \\ \end{array} \begin{array}{c} & & \\ \end{array} \begin{array}{c} $
City Stat LAS VEGAS NV		Code 107		Amount of Each Disbursement this Period
Purpose of Disbursement  Candidate Name GENERAL PURPOSE COMMITTEE			011 Category/ Type	2500.00
Office Sought: House Disbursement Senate Pr	nt For: rimary ther (specify)	General ▼	Туре	
Full Name (Last, First, Middle Initial) NEW MILLENNIUM PAC				Transaction ID: EXP.B.69598 Date of Disbursement
Mailing Address PO BOX 632				$\begin{bmatrix} 1 & 0 & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 7 & 0 \end{bmatrix} / \begin{bmatrix} y & y & 0 & y \\ 2 & 0 & 0 & 9 \end{bmatrix}$
City Stat UNION CITY NJ		Code 087		Amount of Each Disbursement this Period
Purpose of Disbursement			011	5000.00
Candidate Name LEADERSHIP PAC			Category/ Type	
	ent For: rimary ther (specify)	General		
SUBTOTAL of Disbursements This Page (optional)				12500.00

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s) (chec	LINE NUMBER: PAGE 314/335 k only one)
ITEMIZED DISBURSEMENTS	Detailed Summary Page 22	1b 22 X 23 24 25 27 28a 28b 28c 29 3
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	LITICAL ACTION COMMITTEE (a.k	x.a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT CHRIS MURP  Mailing Address PO BOX 127	ΗΥ	Transaction ID: EXP.B.69603 Date of Disbursement
City	State Zip Code	Amount of Each Disbursement this Period
CHESHIRE Purpose of Disbursement	CT 06410	1000.00
Candidate Name CHRISTOPHER MURPHY	Category Type	1
X	sement For: 2010  X Primary General  Other (specify) ▼	
Full Name (Last, First, Middle Initial) NELSON 2012		Transaction ID: EXP.B.69604 Date of Disbursement
Mailing Address PO BOX 8666		10  0  0  0  0  0  0  0  0  0  0  0  0
City OMAHA	State Zip Code NE 68108	Amount of Each Disbursement this Period
Purpose of Disbursement	011	2000.00
Candidate Name E BENJAMIN NELSON	Category Type	
X Senate President	sement For: 2012  X Primary General  Other (specify) ▼	
State: NE District:  Full Name (Last, First, Middle Initial)  CARPER FOR SENATE		Transaction ID: EXP.B.69620 Date of Disbursement
Mailing Address 19 EAST COMMONS	BLVD SECOND FLOOR	10 M / D 16 / Y 2009 Y
City NEW CASTLE	State Zip Code DE 19720	Amount of Each Disbursement this Period
Purpose of Disbursement	011	2500.00
Candidate Name THOMAS CARPER	Category Type	
X Senate President	sement For: 2012 X Primary General Other (specify)	
State: DE District:		
SUBTOTAL of Disbursements This Page (options		5500.00

for each category of the Detailed Summary Page  for each category of the Detailed Summary Page  for each category of the Detailed Summary Page    21b	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
NAME OF COMMITTEE (in Full)  NAME OF COMMITTEE (in Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last. First, Middle Initial) CITIZENS FOR ALTMIRE  Mailing Address P.O. BOX 1776  City State: PA District: 04  Full Name (Last. First, Middle Initial) Citics Sought: X House President President State: ND District: 04  Candidate Name (Last. First, Middle Initial) City State: ND District: 04  Candidate Name (Last. First, Middle Initial) City State: ND District: 04  Candidate Name (Last. First, Middle Initial) City State: ND District: 04  Candidate Name (Last. First, Middle Initial) Candidate Name (Last. First, Middle Initial) City State: ND District: 04  City City State: Zip Code (RY 41018)  City State: ND District: 04  City State: ND District: 04  City City State: Zip Code (RY 41018)  City State: ND District: 04  City City State: ND District: 04  City City State: ND District: 04  Candidate Name (Last. First, Middle Initial) City State: ND District: 04  City City State: ND District: 04  City City State: ND District: 04  City City State: ND City ND State: ND District: 04  Candidate Name (Last. First, Middle Initial) City State: ND District: 04  City City State: ND District: 04  Candidate Name (Last. First, Middle Initial) City City State: ND City ND State: ND District: 04  City City State: ND District: 04  City City State: ND City ND State: ND City ND State: ND District: 04  City City State: ND City ND Sta	TEMIZED DISBURSEMENTS		21b	22 X 23 24 25 2
NAME OF COMMITTEE (in Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial)  City				
CITIZENS FOR ALTMIRE  Mailing Address P.O. BOX 1776  City State Zip Code PA 15042  Purpose of Disbursement  Candidate Name JASON ALTMIRE  Office Sought: X House Senate President  State: PA District: 04  Full Name (Last, First, Middle Initial) EARL POMEROY  Cardidate Name EARL POMEROY  Office Sought: X House Senate President  City State Zip Code ND 58106  City Senate President  Candidate Name EARL POMEROY  Office Sought: X House Senate President Other (specify) ▼  State: ND District:  Full Name (Last, First, Middle Initial)  GEOFF DAVIS FOR CONGRESS  Mailing Address 3161 DIXIE HIGHWAY, SUITE F  City State Zip Code KY 41018  President Senate President Other (specify) ▼  Amount of Each Disbursement this Period  Transaction ID: EXP.B.69622  Date of Disbursement  1001.  Transaction ID: EXP.B.69622  Date of Disbursement this Period  Category/ Type  Office Sought: X House Senate President  Candidate Name GEOFFREY C. DAVIS  Office Sought: X House Senate Purpose of Disbursement  Candidate Name GEOFFREY C. DAVIS  Office Sought: X House Senate President Sen	NAME OF COMMITTEE (In Full)			
Amount of Each Disbursement this Perior Category/ Type  Office Sought: X House President State: PA District: 04  Full Name (Last, First, Middle Initial) EARL POMEROY FOR CONGRESS  Mailing Address P.O. BOX 9336  City Senate Purpose of Disbursement  Candidate Name EARL POMEROY FOR CONGRESS  Mailing Address P.O. BOX 9336  City Senate President Senate Disbursement  Candidate Name EARL POMEROY FOR CONGRESS  Mailing Address P.O. BOX 9336  City Senate President Disbursement  Candidate Name EARL POMEROY FOR CONGRESS  Mailing Address 3161 DIXIE HIGHWAY, SUITE F  City Senate President Disbursement  Candidate Name EARL POMEROY  EARL POMEROY FOR CONGRESS  Mailing Address 3161 DIXIE HIGHWAY, SUITE F  City Senate President State: Xip Code (A1018) Transaction ID: EXP.B.69622 Date of Disbursement this Perior Category/ Type  Transaction ID: EXP.B.69622 Date of Disbursement Type  Transaction ID:	,			
PREEDOM PA 15042 Purpose of Disbursement Candidate Name JASON ALTMIRE  Office Sought:	Mailing Address P.O. BOX 1776			$\begin{bmatrix} 1 & 0 & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 1 & 1 & 6 \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 1 & 2 & 0 & 0 & 9 \end{bmatrix}$
Candidate Name JASON ALTMIRE  Office Sought:				Amount of Each Disbursement this Period
JASON ALTMIRE  Office Sought:				1000.00
Senate President State: PA District: 04  Full Name (Last, First, Middle Initial) EARL POMEROY FOR CONGRESS  Mailing Address P.O. BOX 9336  City State Zip Code ND 58106  Purpose of Disbursement  Candidate Name EARL POMEROY  Office Sought: X House President President State: ND District:  Full Name (Last, First, Middle Initial)  GEOFF DAVIS FOR CONGRESS  Mailing Address 3161 DIXIE HIGHWAY, SUITE F  City State Zip Code X Primary General Other (specify) ▼  Transaction ID: EXP.B.69616  Date of Disbursement To 20 0 0 11	JASON ALTMIRE			
Full Name (Last, First, Middle Initial) EARL POMEROY FOR CONGRESS  Mailing Address P.O. BOX 9336  City State Zip Code ND 58106  Purpose of Disbursement  Candidate Name EARL POMEROY  Office Sought: X House Senate President  State: ND District:  Full Name (Last, First, Middle Initial) GEOFF DAVIS FOR CONGRESS  Mailing Address 3161 DIXIE HIGHWAY, SUITE F  City ERLANGER KY 41018  Purpose of Disbursement  Candidate Name GEOFFREY C. DAVIS  Office Sought: X House Senate RY 41018  Purpose of Disbursement  Candidate Name GEOFFREY C. DAVIS  Office Sought: X House Senate RY 41018  Disbursement For: 2010 Category/ Type  Amount of Each Disbursement this Perior  Amount of Each Disbursement 1500.00  Transaction ID: EXP.B.69622 Date of Disbursement  1001	Senate X President	Primary General		
City State Zip Code ND 58106  Purpose of Disbursement  Candidate Name EARL POMEROY  Office Sought: X House Senate President State: ND District:  Full Name (Last, First, Middle Initial) GEOFF DAVIS FOR CONGRESS  Mailing Address 3161 DIXIE HIGHWAY, SUITE F  City State Xi August State Zip Code KY 41018  Purpose of Disbursement  Candidate Name GEOFFREY C. DAVIS  Office Sought: X House Senate RY House State Zip Code KY 41018  District: 011  Category/ Type  Amount of Each Disbursement this Period ND 11000.00  Transaction ID: EXP.B.69622  Date of Disbursement  1 0 1 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0	Full Name (Last, First, Middle Initial)			
Purpose of Disbursement  Candidate Name EARL POMEROY  Office Sought: X House Senate President State: ND District:  Full Name (Last, First, Middle Initial) GEOFF DAVIS FOR CONGRESS  Mailing Address 3161 DIXIE HIGHWAY, SUITE F  City ERLANGER KY 41018  Purpose of Disbursement  Candidate Name GEOFFREY C. DAVIS  Office Sought: X House Senate President Senate NY Primary General State St				
Candidate Name EARL POMEROY  Office Sought:	City S			Amount of Each Disbursement this Period
EARL POMEROY  Office Sought:				1000.00
Senate President Other (specify) ▼  State: ND District:  Full Name (Last, First, Middle Initial) GEOFF DAVIS FOR CONGRESS  Mailing Address 3161 DIXIE HIGHWAY, SUITE F  City State Zip Code KY 41018  Purpose of Disbursement  Candidate Name GEOFFREY C. DAVIS  Office Sought: X House Senate President State: KY District: 04  State: KY District: 04  X Primary General Other (specify) ▼  Transaction ID: EXP.B.69622  Date of Disbursement  10 1 1 0 1 1 0 1 2 0 0 9 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			0,	
Full Name (Last, First, Middle Initial) GEOFF DAVIS FOR CONGRESS  Mailing Address 3161 DIXIE HIGHWAY, SUITE F  City State Zip Code ERLANGER KY 41018  Purpose of Disbursement  Candidate Name GEOFFREY C. DAVIS  Office Sought: X House Senate President State: KY District: 04  Transaction ID: EXP.B.69622 Date of Disbursement  M 0 M / D 1 6 / Y 2 0 0 9 Y  Amount of Each Disbursement this Period Category/ Type  Office Sought: X House Senate President Other (specify) ▼  State: KY District: 04	Senate X President	Primary General		
City State Zip Code KY 41018  Purpose of Disbursement  Candidate Name GEOFFREY C. DAVIS  Office Sought: X House Senate President President  State: KY District: 04  State Zip Code KY 41018  Amount of Each Disbursement this Perior Category/ Type  Other (specify) ▼  Amount of Each Disbursement this Perior Category/ Type  Other (specify) ▼	Full Name (Last, First, Middle Initial)			
ERLANGER  Purpose of Disbursement  Candidate Name GEOFFREY C. DAVIS  Office Sought:  X House President President State: KY  District: 04  Senate President  State: KY  District: 04  Senate President Other (specify)  ■  1500.00	Mailing Address 3161 DIXIE HIGHWAY, S	SUITE F		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $
Candidate Name GEOFFREY C. DAVIS  Office Sought:  X House Senate President President State: KY  District: 04  O11 Category/ Type  Other (specify)  Other (specify)  Type				
GEOFFREY C. DAVIS  Office Sought:				1500.00
Senate			0,	
2500.00	Senate X President	Primary General		
SUBTUTAL of Dispursements This Page (optional)				3500.00
	SUBTUTAL of Disbursements This Page (optional).		············ <u>}</u>	0300.00

Transaction ID: EXP.B.69618  District: 08  Amount of Each Disbursement  Candidate Name PATRICK MURPHY  Office Sought: X House PENININGTON  Rush HOLT FOR CONGRESS  Mailing Address P.O. BOX 782  City Candidate Name PATRICK MURPHY  Office Sought: X House PENININGTON  Candidate Name RUSH HOLT FOR CONGRESS  Mailing Address P.O. BOX 782  City City City City City City City Cit		Use separate schedule	(S)   (chack only	NUMBER: PAGE 316/335
NAME OF COMMITTEE (in Full)  PATRICK MURPHY FOR CONGRESS  Mailing Address P.O. BOX 868  City  Sanate President  State: PA  District: 08  Full Name (Last, First, Middle Initial)  RUSH HOLT FOR CONGRESS  Mailing Address  P.O. BOX 782  City  State Zip Code Disbursement  NJ  08534  Purpose of Disbursement  Candidate Name RUSH D. HOLT  Office Sought: X House Senate President State: NJ  District: 12  Full Name (Last, First, Middle Initial)  RUSH D. HOLT  Office Sought: X House Senate President State: NJ  District: 12  Disbursement For: 2010  X Primary General Other (specify) ▼  Transaction ID: EXP.B.69621  Date of Disbursement  1011  Category/ Type  Transaction ID: EXP.B.69617  Date of Disbursement  1011  Category/ Type  Transaction ID: EXP.B.69617  Date of Disbursement  1011  Category/ Type  Office Sought: X House Senate President  NJ  State Zip Code Other (specify) ▼  Transaction ID: EXP.B.69617  Date of Disbursement  1011  Category/ Type  Transaction ID: EXP.B.69617  Date of Disbursement this Peric  Category/ Type  Office Sought: X House Senate President  NJ  NJ  State Zip Code ChICO  OA  95927  Purpose of Disbursement  1000.00  Amount of Each Disbursement this Peric  Category/ Type  Office Sought: X House Senate President  NJ  NJ  NJ  NJ  NJ  NJ  NJ  NJ  NJ  N		Detailed Summary Pag	ge 21b 27	22 X 23 24 25 28a 28b 28c 29
MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial) PATRICK MURPHY FOR CONGRESS  Mailing Address P.O. BOX 868  City State Zip Code LEVITTOWN PA 19058  Purpose of Disbursement  Candidate Name PATRICK MURPHY Office Sought: X House Senate President NJ 08534  Full Name (Last, First, Middle Initial) RUSH D, HOLT  Office Sought: X House Senate President NJ 08534  Purpose of Disbursement  Candidate Name RUSH D, HOLT  Office Sought: X House Senate President NJ 08534  Purpose of Disbursement  Candidate Name RUSH D, HOLT  Office Sought: X House President NJ 08534  Purpose of Disbursement  Candidate Name RUSH D, HOLT  Office Sought: X House President NJ 08534  Purpose of Disbursement  Candidate Name (Last, First, Middle Initial) Mailing Address P,O, BOX 1500  City CHICO CA 95927  Purpose of Disbursement  Other (specify) ▼  Transaction ID: EXP.B.69617  Date of Disbursement this Peric 2010  X Primary General Other (specify) ▼  Transaction ID: EXP.B.69617  Date of Disbursement this Peric 2010  Amount of Each Disbursement this Peric 2010  Amount of Each Disbursement this Peric 2010  Category/ Type  Office Sought: X House Senate President Senate President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Category/ Type  Office Sought: X House President NJ Primary Primary Primary Primary Pr				
PATRICK MURPHY FOR CONGRESS  Mailing Address P.O. BOX 868  City State Zip Code PA 19058  Purpose of Disbursement  Candidate Name PATRICK MURPHY  Office Sought: A House President State: PA Disbursement For: 2010 Spent Primary General President President Purpose of Disbursement  City State: PA District: 08  Mailing Address P.O. BOX 782  City State Zip Code Primary General President Primary General President Presid	` '	DLITICAL ACTION COM	MITTEE (a.k.a. N	Medco Health PAC)
City Posident State Posident President President President Senate President Senate President Senate President Senate President Senate Posident Purpose of Disbursement Position President Senate President Pr	•			Date of Disbursement
Purpose of Disbursement  Candidate Name PATRICK MURPHY  Office Sought: X House Senate President State: PA District: 08  Full Name (Last, First, Middle Initial) RUSH HOLT FOR CONGRESS  Mailing Address P.O. BOX 782  City State Number President State: NJ District: 12  Full Name (Last, First, Middle Initial) RUSH D. HOLT  Office Sought: X House Senate President State: NJ District: 12  Full Name (Last, First, Middle Initial) RUSH D. HOLT  Office Sought: X House Senate President State: NJ District: 12  Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX 1500  City State Zip Code CA 95927  Purpose of Disbursement  Candidate Name RUSH D. HOLT  Office Sought: X House Senate President State: NJ District: 12  Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX 1500  City Category' Type  Office Sought: X House Candidate Name WALLY HERGER  Office Sought: X House Senate President  Other (specify) Type  Other (specify) General Other (specify) Type	Mailing Address P.O. BOX 868			10
Candidate Name PATRICK MURPHY  Office Sought:				Amount of Each Disbursement this Perio
PATRICK MURPHY  Office Sought:	Purpose of Disbursement		011	1000.00
Senate President State: PA District: 08  Full Name (Last, First, Middle Initial) RUSH HOLT FOR CONGRESS  Mailing Address P.O. BOX 782  City PENNINGTON NJ 08534  Purpose of Disbursement  Candidate Name RUSH D. HOLT  Office Sought: X House President State: NJ District: 12  Full Name (Last, First, Middle Initial) State: NJ District: 12  Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX 1500  City State Zip Code General Other (specify) ▼  Transaction ID: EXP.B.69621 Date of Disbursement this Peric President Disbursement this Peric President Disbursement For: 2010  Transaction ID: EXP.B.69617 Date of Disbursement In			, ,	
Full Name (Last, First, Middle Initial) RUSH HOLT FOR CONGRESS  Mailing Address P.O. BOX 782  City PENNINGTON Purpose of Disbursement  Candidate Name President State: NJ District: 12  Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX 1500  City CHICO Caddidate Name WALLY HERGER  Office Sought: X House Cardidate Name Wally Herge	Senate President	X Primary Gener	al	
Amount of Each Disbursement    Transaction ID: EXP.B.69617				Transaction ID: EXP R 69621
City PENNINGTON Purpose of Disbursement  Candidate Name RUSH D. HOLT Office Sought:  State: NJ District: 12  Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE  Mailing Address Problem State  Cardidate Name President State: NJ District: 12  Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE  Mailing Address Problem State Cardidate Name WALLY HERGER  Office Sought:  X Primary Disbursement  Mailing Address Problem State Cardidate Name WALLY HERGER  Office Sought:  X Primary Disbursement For: Disbursement For: Disbursement	,			Date of Disbursement
PÉNNINGTON NJ 08534  Purpose of Disbursement  Candidate Name RUSH D. HOLT  Office Sought:	Mailing Address P.O. BOX 782			10 16 2009
Candidate Name RUSH D. HOLT  Office Sought:				Amount of Each Disbursement this Perio
RUSH D. HOLT  Office Sought:	Purpose of Disbursement		011	2500.00
Senate President State: NJ District: 12  Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX 1500  City CHICO CAA 95927  Purpose of Disbursement  Candidate Name WALLY HERGER Office Sought: X Primary Other (specify) ▼  Transaction ID: EXP.B.69617 Date of Disbursement  Mo M 10				
Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX 1500  City State Zip Code CHICO CA 95927  Purpose of Disbursement  Candidate Name WALLY HERGER  Office Sought: X House Senate President  Disbursement For: 2010 Senate President  Amount of Each Disbursement this Period Category/Type  Other (specify) ▼  Transaction ID: EXP.B.69617  Date of Disbursement  Amount of Each Disbursement this Period Category/Type  Other (specify) ▼	Senate President	X Primary Gener	al	
City State Zip Code CHICO CA 95927  Purpose of Disbursement  Candidate Name WALLY HERGER  Office Sought: X House Senate President  Disbursement For: 2010 Senate President  Other (specify) ▼	Full Name (Last, First, Middle Initial)			
CHICO  Purpose of Disbursement  Candidate Name WALLY HERGER  Office Sought:  X House Senate President  CA 95927  1000.00  11  Category/ Type  Category/ Type  Category/ Type  Other (specify) ▼	Mailing Address P.O. BOX 1500			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
Candidate Name WALLY HERGER  Office Sought:  X House Senate President  Disbursement For:  X Primary General Other (specify)  Other (specify)				Amount of Each Disbursement this Perio
Candidate Name WALLY HERGER  Office Sought:  X House Senate President  Category/ Type  Category/ Type  Category/ Type  Category/ Type	Purpose of Disbursement		011	1000.00
Senate X Primary General President Other (specify) ▼				
State: CA District: 02	Senate	X Primary Gener	al	
	President			

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL ACTION COMMI	TTEE (a.k.a. N	Medco Health PAC)
Full Name (Last, First, Middle Initial) BILIRAKIS FOR CONGRESS  Mailing Address 610 S. BOULEVARD			Transaction ID: EXP.B.70272 Date of Disbursement  M M M / D 2 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Amount of Each Disbursement this Period
TAMPA	FL 33606		1000.00
Purpose of Disbursement		011	1000.00
Candidate Name GUS MICHAEL BILIRAKIS		Category/ Type	
Office Sought:  X House  Senate  President  State: FL  District: 09	x Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)  DRIEHAUS FOR CONGRESS			Transaction ID: EXP.B.70275 Date of Disbursement
	.,		1 0 2 2 2 2 0 0 9
Mailing Address 350 FOX TRAILS WA			2003
City CINCINNATI	State Zip Code OH 45233		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name STEVEN LEO DRIEHAUS		Category/ Type	
Senate President	xrsement For: 2010  X Primary General  Other (specify)	,,	
State: OH District: 01  Full Name (Last, First, Middle Initial)  FRIENDS OF JIM CLYBURN			Transaction ID: EXP.B.70270 Date of Disbursement
Mailing Address P.O. BOX 12567			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $
City COLUMBIA	State Zip Code SC 29211		Amount of Each Disbursement this Period
Purpose of Disbursement	20211	011	2500.00
Candidate Name JIM CLYBURN		Category/ Type	
Senate President	x Primary General Other (specify)		
State: SC District: 06			4500.00
SUBTOTAL of Disbursements This Page (option	al)	<u></u>	4500.00
TOTAL This Period (last page this line number o	nly)		

CHEDULE B (FEC F	•	Use sep	arate schedule(s)			R LINE	NUMB v one)	ER:			PA	AGE	318 /	335
EMIZED DISBURSEI	VIENTS		category of the Summary Page		$\Box$	21b 27	22 28a	X	23 28b	F	24 28c	П	25 29	
ny Information copied from such F for commercial purposes, other th														
NAME OF COMMITTEE (In Fu		e and addre	55 of arry political	COIII	iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	10 30	DIICIL COI	liibu	110113	11011	i Sucii (	5011111	IIIICC	
MEDCO HEALTH SOLUTION	•	ITICAL AC	CTION COMMIT	ΓΤΕ	E (a	.k.a. I	Medco	Hea	lth F	PAC	)			
Full Name (Last, First, Middle In FRIENDS OF LOIS CAPPS	•								t <b>ion I</b> l		EXP.E	3.702	276	
Mailing Address P.O. BOX	( 23940						1 <sup>M</sup> (	) <sup>M</sup>	/ [	2 2		ž	0 ŏ 9	Y
City SANTA BARBARA		State CA	Zip Code 93121				Amo	unt d	of Eac	ch D	isburse	ement	this P	Perio
Purpose of Disbursement					011							200	00.00	
Candidate Name LOIS G. CAPPS					atego Type	-								
Office Sought:  X House Senate Presiden	Х	ement For: Primary Other (spe	2010 General											
State: CA District: 23														
Full Name (Last, First, Middle In HOOSIERS FOR HILL	itial)						_		t <b>ion I</b> l Disbur		EXP.E	3.702	274	
Mailing Address P.O. BOX	( 1071						1 <sup>M</sup> (	) M	/ [	2 2		ž	0 ŏ 9	Y
City SEYMOUR		State IN	Zip Code 47274				Amo	unt d	of Eac	ch D	isburse	ement	this P	erio
Purpose of Disbursement					0.1.1							100	00.00	
Candidate Name BARON P. HILL				Ca	011 atego Type	•								
Office Sought: X House Senate Presiden	X	ement For: Primary Other (spe	2010 General											
State: IN District: 09														
Full Name (Last, First, Middle In MENENDEZ FOR SENATE	•						Date	of D	Disbur	sem		3.702	273	
Mailing Address PO BOX	848						1 <sup>M</sup> (	) <sup>M</sup>	/ [	2 2		ž	o ŏ 9	Y
City UNION CITY		State NJ	Zip Code 07087				Amo	unt d	of Eac	ch D	isburse	-		-
Purpose of Disbursement					011							500	00.00	
Candidate Name ROBERT MENENDEZ				Ca	011 atego Type	ry/								
Office Sought:  House  X Senate  Presiden	X	Primary	2012 General											
State: NJ District:		Other (spe	ecity) 🔻											
									-			-		,

Mailing Address 123 EAST 13TH STREET  City S ANNISTON  Purpose of Disbursement  Candidate Name MICHAEL ROGERS  Office Sought: X House Disburser	and address of any political  FICAL ACTION COMMI  State Zip Code  AL 36201	committee to	22 X 23 24 25 29 30 an for the purpose of soliciting contributions solicit contributions from such committee
or for commercial purposes, other than using the name  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLIT  Full Name (Last, First, Middle Initial)  MIKE ROGERS FOR CONGRESS  Mailing Address 123 EAST 13TH STREET  City ANNISTON Purpose of Disbursement  Candidate Name MICHAEL ROGERS  Office Sought: X House Senate Y President	and address of any political  FICAL ACTION COMMI  State Zip Code AL 36201  ment For: 2010  Primary General	TTEE (a.k.a  011 Category/	Transaction ID: EXP.B.70271 Date of Disbursement  Mount of Each Disbursement this Period
MIKE ROGERS FOR CONGRESS  Mailing Address 123 EAST 13TH STREET  City S ANNISTON Purpose of Disbursement  Candidate Name MICHAEL ROGERS  Office Sought: X House Senate X President	State Zip Code AL 36201  ment For: 2010 Primary General	Category/	Date of Disbursement    M M M
AŃNISTON Purpose of Disbursement  Candidate Name MICHAEL ROGERS  Office Sought: X House Disburser Senate X President	AL 36201  ment For: 2010  Primary General	Category/	
Candidate Name MICHAEL ROGERS  Office Sought: X House Disburser Senate X President	Primary General	Category/	
Senate X President	Primary General		
Otato: 712 Biotifoti 00			
Full Name (Last, First, Middle Initial) SENATE MAJORITY FUND  Mailing Address P.O. BOX 32025			Transaction ID: EXP.B.70277 Date of Disbursement  10
PHOENIX Purpose of Disbursement  Candidate Name	State Zip Code AZ 85064	011 Category/	Amount of Each Disbursement this Period 5000.00
LEADERSHIP PAC  Office Sought: House Senate President  State: District:	ment For: Primary General Other (specify)	Туре	
Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOLN			Transaction ID: EXP.B.70957 Date of Disbursement
Mailing Address P.O. BOX 3197			1 0 M / D 2 8 / Y 2 0 0 9 Y
	State Zip Code AR 72203		Amount of Each Disbursement this Period
Purpose of Disbursement  Candidate Name BLANCH LAMBERT LINCOLN		011 Category/ Type	2500.00
Office Sought:    House   Disburser   X	ment For: 2010 Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)			8500.00

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
Any Information copied from such Reports and Stator for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL ACTION COMMI	TTEE (a.k.a. M	fledco Health PAC)
Full Name (Last, First, Middle Initial)  FRIENDS OF BLANCHE LINCOLN  Mailing Address P.O. BOX 3197			Transaction ID: EXP.B.70958 Date of Disbursement    M   M   / D   B   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code		
LITTLE ROCK	AR 72203		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2500.00
Candidate Name BLANCH LAMBERT LINCOLN		Category/ Type	
X Senate President	rsement For: 2010 Primary X General Other (specify)		
State: AR District:  Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.70956
GEORGIANS FOR ISAKSON			Date of Disbursement
Mailing Address P.O. BOX 150116			10  28  2009
City ATLANTA	State Zip Code GA 30325		Amount of Each Disbursement this Period
Purpose of Disbursement  Candidate Name JOHN HARDY ISAKSON		011 Category/ Type	1000.00
	rsement For: 2010  X Primary General  Other (specify)	Турс	
Full Name (Last, First, Middle Initial) PRICE FOR CONGRESS			Transaction ID: EXP.B.70959 Date of Disbursement
Mailing Address PO BOX 425			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
City Roswell	State Zip Code GA 30077		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name THOMAS EDMUNDS PRICE		Category/ Type	
Senate President	rsement For: 2010  X Primary General Other (specify)		
State: GA District: 06			1700.00
SUBTOTAL of Disbursements This Page (options	(ls	<b>&gt;</b>	4500.00
TOTAL This Period (last page this line number or	nly)		54500.00

IT	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	FOR LINE	
11	EMIZED DISBURSEMENTS		category of the Summary Page	(check only	22 23 24 25 28 28b 28c X 29
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam				
$\rangle$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL AC	CTION COMMI	TTEE (a.k.a. M	Medco Health PAC)
	Full Name (Last, First, Middle Initial) ELECTION FUND OF NILSA CRUZ-PERE	 Z			Transaction ID: EXP.B.69623 Date of Disbursement
	Mailing Address P.O. BOX 3235				$\begin{bmatrix} M & M & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 2 & 0 \end{bmatrix} / \begin{bmatrix} Y & \check{2} & 0 & \check{1} & 9 \\ 2 & 0 & 0 & 9 \end{bmatrix}$
	City CAMDEN	State NJ	Zip Code 08101		Amount of Each Disbursement this Period
	Purpose of Disbursement VOIDED CHECK Candidate Name			011	-500.00
	NON-FEDERAL CONTRIBUTION		0000	Category/ Type	
	Office Sought:    House   Disburse     Senate   President     State: NJ   District:	ement For: Primary Other (spe	2009 X General ecify) ▼		
	Full Name (Last, First, Middle Initial) ELECTION FUND OF MARY PAT ANGEL	.INI			Transaction ID: EXP.B.70268 Date of Disbursement
	Mailing Address P.O. BOX 517				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
	City OAKHURST	State NJ	Zip Code 07755		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	250.00
	Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type	
	Office Sought:  Senate President  State: NJ  Disburse  Senate	ement For: Primary Other (spe	2009 X General ecify) ▼		
	Full Name (Last, First, Middle Initial) FRIENDS OF VALERIE VAINIERI HUTTL	E FOR AS	SEMBLY		Transaction ID: EXP.B.70269 Date of Disbursement
	Mailing Address P.O. BOX 8078				$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 2 & D \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Q & Q \\ 2 & Q & Q & Q \end{bmatrix}$
					Amount of Each Disbursement this Period
	City ENGLEWOOD	State NJ	Zip Code 07631		
	ENGLEWOOD Purpose of Disbursement			011	250.00
	ENGLEWOOD Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION	NJ		011 Category/ Type	
	ENGLEWOOD Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION		2009 X General	Category/	

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE (check only	
IT	FEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22
	ny Information copied from such Reports and Staten for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POL	TICAL ACTION COMMI	TTEE (a.k.a. M	Medco Health PAC)
<u>۷</u> ۸.	Full Name (Last, First, Middle Initial) OROHO FOR SENATE  Mailing Address 93 SPRING STREET			Transaction ID: EXP.B.70267 Date of Disbursement
	City NEWTON	State Zip Code NJ 07860		Amount of Each Disbursement this Period
	Purpose of Disbursement	0.000	011	250.00
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
		ement For: 2011 Primary General Other (specify)		
 3.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT BETH HARWEL	L		Transaction ID: EXP.B.70282 Date of Disbursement
	Mailing Address 42 WYN OAK			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $
	City NASHVILLE	State Zip Code TN 37205		Amount of Each Disbursement this Period
	Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type	500.00
	ÿ 🗎 🗆	ement For: 2010 Primary General Other (specify)	7	
).	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT BILL HARMON			Transaction ID: EXP.B.70280 Date of Disbursement
	Mailing Address 107 HARMON DRIVE No	ORTH		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & Q \\ 2 & 0 & Q & 9 \end{smallmatrix} \end{bmatrix}$
	City DUNLAP	State Zip Code TN 37327		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
		ement For: 2010 Primary General Other (specify)		
	SUBTOTAL of Disbursements This Page (optional)			1250.00
	FOTAL This Period (last page this line number only)			
L'	TOTAL THIS I CHOO (last page this line humber only)		·······	

		Use separate schedule(s)			R LINE I eck only		H:	L	PAGE	323 /	335
_	TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		À	21b 27	22 28a	23 28b		3c X	25 29	26 30k
	ny Information copied from such Reports and Statem for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	e and address of any politica	l com	mitt	ee to soli	cit contri	butions 1	from suc			
<u> </u>	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT BILL KETRON  Mailing Address 805 SOUTH CHURCH S	TREET, SUITE 12					action II of Disbur			295 0 0 9	Y
	City MURFREESBORO Purpose of Disbursement	State Zip Code TN 37130				Amou	nt of Eac	h Disbu	-	t this P	eriod
	Candidate Name NON-FEDERAL CONTRIBUTION		Ca	01 ateg Typ	ory/						
	· — — —	ement For: 2010 Primary General Other (specify)									
В.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT BO WATSON  Mailing Address 1607 GUNSTON HALL F	ROAD				Date o	action II of Disbur	sement		301 0 ŏ 9	Y
	City HIXON Purpose of Disbursement  Candidate Name	State Zip Code TN 37343	_	01		Amou	nt of Eac	h Disbu		t this P	eriod
	NON-FEDERAL CONTRIBUTION Office Sought: House Disburse	ement For: 2010 Primary General Other (specify)		ateg Typ	-						
 C.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT BOB RAMSEY					Date o	action II of Disbur			288 0 ŏ 9	Y
	•	State Zip Code				1 0	nt of Eac				
	MARYVILLE Purpose of Disbursement	TN 37803		01 <sup>-</sup>					50	00.00	Ċ
	Candidate Name NON-FEDERAL CONTRIBUTION Office Sought: House Disburse	ement For: 2010		ateg Typ	ory/ e						
	* H	Primary General Other (specify)									
٤	SUBTOTAL of Disbursements This Page (optional)				<u> </u>				150	00.00	
	<b>FOTAL</b> This Period (last page this line number only)				<u> </u>					-	-

	CHEDULE B (FEC FOIIII 3X)	Use separate schedule(s	) FOR LIN	NE NUMBER: PAGE 324 / 335
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c X 29 3
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI			
	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT CHARLES CUR	TISS		Transaction ID: EXP.B.70278 Date of Disbursement  10  23  7  2009
	Mailing Address 120 GENERAL JONES F	ROAD		10 23 2009
	SPARTA	State Zip Code TN 38583		Amount of Each Disbursement this Period
	Purpose of Disbursement  Candidate Name		011	500.00
	NON-FEDERAL CONTRIBUTION		Category/ Type	
	Senate X President	ment For: 2010 Primary General Other (specify)		
_	State: TN District: Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT CHARLES MICH	AEI SADGENT		Transaction ID: EXP.B.70286
	Mailing Address 117 ASHTON PARK BL\			Date of Disbursement  M M M / D D D / Y Y Y O Y O Y
	City FRANKLIN	State Zip Code TN 37067		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
	* H	ment For: 2010 Primary General Other (specify)		
	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT CRAIG FITZHUO	SH		Transaction ID: EXP.B.70279 Date of Disbursement
	Mailing Address 135 SOUTH ALPINE ST	REET		10 M / D D D / Y 2009 Y
	City RIPLEY	State Zip Code TN 38063		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
		ment For: 2010 Primary General Other (specify)		
_	Otate. The District.			

	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)		NUMBER: PAGE 325 / 335
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only	y one) 22
An	y Information copied from such Reports and State	ments may n	ot be sold or used		
	for commercial purposes, other than using the nar				
$\rangle$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL AC	CTION COMMI	TTEE (a.k.a. N	Medco Health PAC)
	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT DAVID SHEPA	RD			Transaction ID: EXP.B.70290 Date of Disbursement
	Mailing Address 204 MCCREARY HEIG	HTS			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
	City DICKSON	State TN	Zip Code 37055		Amount of Each Disbursement this Period
	Purpose of Disbursement  Candidate Name			011	500.00
	NON-FEDERAL CONTRIBUTION		0010	Category/ Type	
	Senate President	sement For:  X Primary  Other (spe	2010 General ecify) ▼		
	State: TN District: Full Name (Last, First, Middle Initial)				Transaction ID: EXP.B.70298
	COMMITTEE TO ELECT DOUG OVERBEY				Date of Disbursement
	Mailing Address 1105 NORTH HERITAG	GE DRIVE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix}  /  \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix}  /  \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
	City MARYVILLE	State TN	Zip Code 37803		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	500.00
	Candidate Name NON-FEDERAL CONTRIBUTION	Category/ Type			
	ÿ	sement For: X Primary Other (spe	2012 General ecify) ▼		
	State: TN District:				
	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT ERIC STEWAF		Transaction ID: EXP.B.70299 Date of Disbursement		
	Mailing Address 500 DINAH SHORE BC	ULEVARD			$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1^M&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D&D\\2^M&3\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2^M&0^M&9\end{smallmatrix}\end{bmatrix}$
	City WINCHESTER	State TN	Zip Code 37398		Amount of Each Disbursement this Perio
	Purpose of Disbursement			011	500.00
	Candidate Name		Categ Typ		
	NON-FEDERAL CONTRIBUTION				
	Office Sought: House Disbur. Senate President	sement For:  X Primary  Other (spe	2012 General ecify) ▼		
_	Office Sought: House Disbur. Senate	X Primary	General		1500.00

	CHEDULE B (FEC FOIII 37	' Use sepa	arate schedule(s)		LINE NUMBER: PAGE 326 / 339 k only one)
	EMIZED DISBURSEMENTS	Detailed	category of the Summary Page	21 27	1b 22 23 24 25 7 28a 28b 28c X 29
					rson for the purpose of soliciting contributions to solicit contributions from such committee
$\rangle$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL AC	TION COMMI	TTEE (a.k	a.a. Medco Health PAC)
	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT JACK JOI	HNSON			Transaction ID: EXP.B.70294 Date of Disbursement
	Mailing Address 330 FRANKLIN R	OAD, SUITE 135	5-A-178		10 M / 23 / Y 2009 Y
	City BRENTWOOD	State TN	Zip Code 37027		Amount of Each Disbursement this Perio
	Purpose of Disbursement			011	500.00
	Candidate Name NON-FEDERAL CONTRIBUTION			Category, Type	
	Senate President	Disbursement For:  X Primary  Other (spe	2010 General		
	State: TN District: Full Name (Last, First, Middle Initial)				Transaction ID: EXP.B.70284
	COMMITTEE TO ELECT JOE MCCORD				Date of Disbursement
	Mailing Address 4504 MONTVALE ROAD				10 M / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MARYVILLE	State TN	Zip Code 37803		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	500.00
	Candidate Name NON-FEDERAL CONTRIBUTION			Category Type	
	Office Sought: House Senate President	Disbursement For:  X Primary  Other (spe	2010 General		
	State: TN District: Full Name (Last, First, Middle Initial)				Transaction ID: EXP.B.70283
	COMMITTEE TO ELECT JOEY HENSLEY				Date of Disbursement
	Mailing Address 855 SUMMERTO	WN HIGHWAY			10 M / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City HOHENWALD	State TN	Zip Code 38462		Amount of Each Disbursement this Period
	Purpose of Disbursement		Г		500.00
	Candidate Name NON-FEDERAL CONTRIBUTION			Category Type	1
	Senate President	Disbursement For:  X Primary Other (spe	2010 General		
	State: TN District:				

SCHEDULE B (FEC Form TEMIZED DISBURSEMEN	ITS   Use sepa	arate schedule(s) category of the Summary Page	FOR LINE (check only		7 335
		, °	27	28a 28b 28c X 29	
any Information copied from such Reports r for commercial purposes, other than usi					
NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS I	NC. POLITICAL AC	CTION COMMIT	TEE (a.k.a. N	Medco Health PAC)	
Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT MARK	NORRIS			Transaction ID: EXP.B.70297 Date of Disbursement	
Mailing Address 853 SOUTH Co	OLLIERVILLE-ARLI	NGTON R		$\begin{bmatrix} \begin{smallmatrix} M \\ 1 \end{smallmatrix} 0 & \begin{smallmatrix} M \\ \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} 2 & \begin{smallmatrix} D \\ 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} 2 & 0 & 0 \\ \end{smallmatrix}$	9 <sup>Y</sup>
City COLLIERVILLE	State TN	Zip Code 38017		Amount of Each Disbursement this	
Purpose of Disbursement			011	1000.0	10
Candidate Name NON-FEDERAL CONTRIBUTIO		2010	Category/ Type		
Office Sought: House Senate President	Disbursement For:  X Primary Other (spe	2012 General ecify)			
State: TN District:  Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT MIKE I	IADDICON			Transaction ID: EXP.B.70281	
				Date of Disbursement	O Y
Mailing Address 115 GREEN A					
City ROGERSVILLE	State TN	Zip Code 37857		Amount of Each Disbursement this	Perio
Purpose of Disbursement			011	500.0	0
Candidate Name NON-FEDERAL CONTRIBUTION	N		Category/ Type		
Office Sought: House Senate President	Disbursement For:  X Primary Other (spe	2010 General ecify)			
State: TN District:  Full Name (Last, First, Middle Initial)				Transaction ID: EXP.B.70296	
COMMITTEE TO ELECT RAND	Y MCNALLY			Date of Disbursement	Y
Mailing Address 94 ROYAL TRO	OON CIRCLE			10  23  7  200	9
City OAK RIDGE	State TN	Zip Code 37830		Amount of Each Disbursement this	
Purpose of Disbursement			011	500.0	Ü
Candidate Name NON-FEDERAL CONTRIBUTION	N		Category/ Type		
Office Sought: House Senate President	Disbursement For:  X Primary Other (spe	2010 General			
State: TN District:		· · ·			

TEMIZED DISBURSEMENTS  for each category of the betailed Summary Page  Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of the process of the purpose of Disbursement  Mailing Address  P.O. BOX 75212  City  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Transaction ID: EXP.B.70300  Date of Disbursement  Mailing Address  P.O. BOX 75212  City  MEMPHIS  TN  State  Transaction ID: EXP.B.70300  Date of Disbursement this Period  Transaction ID: EXP.B.70300  Date of Disbursement this Period  Type  Office Sought:  Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT RICHARD MONTGOMERY  Mailing Address  I house  Senate  President  Candidate Name  NON-FEDERAL CONTRIBUTION  Office Sought:  Full Name (Last, First, Middle Initial)  Committee To ELECT RICHARD MONTGOMERY  Mailing Address  Disbursement  Other (specify)  Type  Transaction ID: EXP.B.70289  Date of Disbursement  Type  Amount of Each Disbursement this Period  Type  Type  Type  Type  Type  Transaction ID: EXP.B.70292  Date of Disbursement  Type  Typ		Use sep	arate schedule(s)		NUMBER: PAGE 328 / 335
NAME OF COMMITTEE (In Full)  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT REGINALD TATE  Mailing Address P.O. BOX 75212  City State Zip Code TN 38175  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: TN 3876  Purpose of Disbursement  City State Zip Code TN 3876  Purpose of Disbursement  City State Zip Code TN 37876  Purpose of Disbursement  City State Zip Code TN 37876  Purpose of Disbursement  City State Zip Code TN 37876  Purpose of Disbursement  City State Zip Code TN 37876  Purpose of Disbursement  City State Zip Code TN 37876  Purpose of Disbursement  Candidate Name Non-FEDERAL CONTRIBUTION  Office Sought: House President State: Zip Code TN 37876  Purpose of Disbursement  Candidate Name Non-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: Zip Code TN 37876  Purpose of Disbursement  Candidate Name Non-FEDERAL CONTRIBUTION  Office Sought: House Senate President State Zip Code TN 37876  Transaction ID: EXP.B.70289  Date of Disbursement this Perior Type  Transaction ID: EXP.B.70292  Date of Disbursement this Perior Type  Transaction ID: EXP.B.70292  Date of Disbursement this Perior Type  Transaction ID: EXP.B.70292  Date of Disbursement this Perior Type  Transaction ID: EXP.B.70292  Date of Disbursement this Perior Type  Transaction ID: EXP.B.70292  Date of Disbursement To: 2010  Amount of Each Disbursement this Perior Type  Transaction ID: EXP.B.70292  Date of Disbursement This Perior Type  Transaction ID: EXP.B.70292  Date of Disbursement This Perior Type  Transaction ID: EXP.B.70292  Date of Disbursement Type  Transaction ID: EXP	TEMIZED DISBURSEMENTS	for each	category of the '	21b	22 23 24 25
NAME OF COMMITTEE (In Full)  MEDOO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT REGINALD TATE  Mailing Address P.O. BOX 75212  City State Zip Code TN 38175  Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION Office Sought: House President IN 37876  State: TN District:  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RICHARD MONTGOMERY  Mailing Address 1582 BROAD RIVER LANE  City State: TN 37876  Purpose of Disbursement  Candidate Name NoN-FEDERAL CONTRIBUTION Office Sought: House Sevice TN 37876  Purpose of Disbursement  Candidate Name NoN-FEDERAL CONTRIBUTION  Office Sough: House President Non-FEDERAL CONTRIBUTION  Office Sough: House Non-FEDERAL CON					
COMMITTEE TO ELECT REGINALD TATE  Mailing Address P.O. BOX 75212  City State Zip Code MEMPHIS TN 38175  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President Other (specify) ▼  Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT RICHARD MONTGOMERY  Mailing Address 1582 BROAD RIVER LANE  City SEVIERVILLE TN 37876  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President State Zip Code SEVIERVILLE TN 37876  Purpose of Disbursement  Candidate Name NoN-FEDERAL CONTRIBUTION  Office Sought: House President State Zip Code Senate President State: TN District:  Transaction ID: EXP.B.70289  Amount of Each Disbursement this Perior Disbursement To: 2010 Type  Office Sought: House President Other (specify) ▼  Transaction ID: EXP.B.70292  Date of Disbursement this Perior Disbursement To: 2010 Type  Transaction ID: EXP.B.70292  Date of Disbursement Transaction ID: Transaction ID: Transaction ID: Transactio	NAME OF COMMITTEE (In Full)				
City State Zip Code TN 38175  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President State: TN District:  Full Name (Last, First, Middle Initial)  City State Zip Code TN 37876  Purpose of Disbursement  City State Zip Code TN 37876  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President TN 37876  Senate TN 37876  Full Name (Last, First, Middle Initial)  Committee To ELECT RICHARD MONTGOMERY  City State Zip Code TN 37876  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President State: TN District:  Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT RUSTY CROWE  Mailing Address 808 EAST 8TH AVENUE  City State Zip Code TN 37801  Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT RUSTY CROWE  Mailing Address 808 EAST 8TH AVENUE  City State Zip Code TN 37801  Furpose of Disbursement  Office Sought: Office Sought: No 37801  Furpose of Disbursement  Office Sought: No 37801  Furpose of Disbursement  Office Sought: No 37801  Furpose of Disbursement  Office Sought: Office Sought: Office Sought: No 37801  Furpose of Disbursement  Office Sought:	,	ATE			Date of Disbursement
MEMPHIS TN 38175  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought:	Mailing Address P.O. BOX 75212				10
Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: TN District:  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RICHARD MONTGOMERY  Mailing Address 1582 BROAD RIVER LANE  City State TN District: TN 37876  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: TN District:  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RICHARD MONTGOMERY  Transaction ID: EXP.B.70289 Date of Disbursement In To Y 2 3 1 2 0 0 9 1					Amount of Each Disbursement this Period
NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: TN District:  Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT RICHARD MONTGOMERY  Mailing Address 1582 BROAD RIVER LANE  City Seview TN 37876  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: TN District:  Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT RICHARD MONTGOMERY  Amount of Each Disbursement this Perior State: TN District:  Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT RUSTY CROWE  Mailing Address 808 EAST 8TH AVENUE  City JOHNSON CITY TN 37601  Purpose of Disbursement  Candidate Name Non-FEDERAL CONTRIBUTION  Office Sought: State Zip Code JOHNSON CITY TN 37601  Purpose of Disbursement  City JOHNSON CITY TN 37601  Purpose of Disbursement  Candidate Name Non-FEDERAL CONTRIBUTION  Office Sought: House Senate President State Zip Code JOHNSON CITY TN 37601  Purpose of Disbursement  City JOHNSON CITY TN 37601  Candidate Name Non-FEDERAL CONTRIBUTION  Office Sought: House Senate President Non-FeDERAL CONTRIBUTION  Office Sought: House Senate					500.00
Senate President State: TN District:  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RICHARD MONTGOMERY  Mailing Address 1582 BROAD RIVER LANE  City State Zip Code TN 37876  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President President State: TN District:  Full Name (Last, First, Middle Initial) Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President State: TN District:  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RUSTY CROWE  Mailing Address 808 EAST 8TH AVENUE  City State Zip Code Jobbursement To: 2010 JOHNSON CITY TN 37601  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	NON-FEDERAL CONTRIBUTION	waamant Fari	2010	0,	
Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RICHARD MONTGOMERY  Mailing Address 1582 BROAD RIVER LANE  City SEVIERVILLE TN 37876  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President State: TN District:  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RUSTY CROWE  Mailing Address 808 EAST 8TH AVENUE  City JOHNSON CITY State Zip Code TN 37601  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: State Zip Code TN 37601  City State Zip Code TN 37601  Candidate Name NON-FEDERAL CONTRIBUTION  City State Zip Code TN 37601  Candidate Name NON-FEDERAL CONTRIBUTION  Committee To Elect Rusty Crows  Amount of Each Disbursement this Perior Disbursement  Transaction ID: EXP.B.70292  Date of Disbursement  1011  Category Type  Amount of Each Disbursement  1011  Category Type  Transaction ID: EXP.B.70292  Date of Disbursement  1011  Category Type  Office Sought: House Senate President  Amount of Each Disbursement this Perior Sound  Amount of Each Disbursement this Perior Sound  Amount of Each Disbursement this Perior Sound  Amount of Each Disbursement For Sound  Amount of E	Senate President	X Primary	General		
City SEVIERVILLE TN 37876  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: TN District:  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RUSTY CROWE  Mailing Address 808 EAST 8TH AVENUE  City JOHNSON CITY TN 37601  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Other (specify) ▼  Transaction ID: EXP.B.70292  Date of Disbursement  Transaction ID: EXP.B.70292  Date of Disbursement  Molling Address 808 EAST 8TH AVENUE  Amount of Each Disbursement this Perior To Each	Full Name (Last, First, Middle Initial)				
SÉVIERVILLE  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought:  House Senate President  State: TN District:  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RUSTY CROWE  Mailing Address  808 EAST 8TH AVENUE  City JOHNSON CITY  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought:  Amount of Each Disbursement this Period  Transaction ID:  EXP.B.70292 Date of Disbursement  Mo M / D 2 3 / Y 2 0 0 9 Y  Amount of Each Disbursement this Period  Total Category/ Type  Office Sought:  House Senate President  Disbursement For: Quitable Name NON-FEDERAL CONTRIBUTION  Office Sought: Primary General Other (specify)  Other (specify)  Other (specify)  Other (specify)  Other (specify)	Mailing Address 1582 BROAD RIVER I	LANE			$\begin{bmatrix}\begin{smallmatrix}M&M\\1&0\end{smallmatrix}\end{bmatrix}^M  \begin{bmatrix}\begin{smallmatrix}D&2&3\\2&3\end{smallmatrix}\end{bmatrix}^M  \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&0&9\end{smallmatrix}\end{bmatrix}^Y$
Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President Other (specify) ▼  State: TN District:  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RUSTY CROWE  Mailing Address 808 EAST 8TH AVENUE  City State Zip Code JOHNSON CITY TN 37601  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President Disbursement For: 2010  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President Other (specify) ▼					Amount of Each Disbursement this Period
NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: TN District:  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RUSTY CROWE  Mailing Address 808 EAST 8TH AVENUE  City JOHNSON CITY TN 37601  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President  Disbursement For: 2010 Amount of Each Disbursement this Period Senate President  Amount of Each Disbursement Sounds  Category/ Type  Other (specify) ▼  Transaction ID: EXP.B.70292  Date of Disbursement  1 0 1 1	Purpose of Disbursement			011	500.00
Senate					
Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT RUSTY CROWE  Mailing Address 808 EAST 8TH AVENUE  City State Zip Code JOHNSON CITY TN 37601  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President  Disbursement For: 2010 X Primary General Other (specify)  Other (specify)  Other (specify)	Senate President	X Primary	General		
City State Zip Code JOHNSON CITY TN 37601  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President  Disbursement For: 2010  Senate Primary General  Other (specify)  Other (specify)	Full Name (Last, First, Middle Initial)				
JOHNSON CITY  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought:  House Senate President  Disbursement For: Senate President  Disbursement For: Senate President  Other (specify)   Type	Mailing Address 808 EAST 8TH AVEN	UE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} $
Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought:  House Senate President  Disbursement For:  X Primary General Other (specify)					Amount of Each Disbursement this Period
NON-FEDERAL CONTRIBUTION  Office Sought:  Senate President  Disbursement For:  X Primary General Other (specify)					500.00
Senate X Primary General President Other (specify) ▼					
	Office Sought: House Disbu	X Primary	General		

	CHEDULE B (FEC FOIIII 3X)	Use separate schedule(s		NE NUMBER: PAGE 329 / 335 only one)
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c X 29 3
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full)	dia address of any pointed		y solicit contributions from such committee
	MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMI	ITTEE (a.k.a	a. Medco Health PAC)
	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT STEVE MCDAN	EL		Transaction ID: EXP.B.70285 Date of Disbursement
	Mailing Address 97 BATTLEGROUND DR	RIVE		10 7 23 7 2009
	City PARKERS CROSSROADS	State Zip Code TN 38388		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	1
	Senate X President	ment For: 2010 Primary General Other (specify)		
_	State: TN District:			
ı	Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT BRUCE GOI	ORTH		Transaction ID: EXP.B.70308  Date of Disbursement
	Mailing Address 137 STONECREST DRI	/E		10  23  2009
	City ASHEVILLE	State Zip Code NC 28803		Amount of Each Disbursement this Period
	Purpose of Disbursement			250.00
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
	Senate X President	ment For: 2010 Primary General Other (specify)	•	
	State: NC District:  Full Name (Last, First, Middle Initial)  FRIENDS OF JIMMY NAIFEH			Transaction ID: EXP.B.70287 Date of Disbursement
	Mailing Address P.O. BOX 97			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City COVINGTON	State Zip Code TN 38019		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	1
	Senate X President	ment For: 2010 Primary General Other (specify)		
_	State: TN District:			

		Use separate schedule(s		FOR L (check	only one)				. / (0	iE 330	7 000
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		211	22 28a	$\perp$	23 28b		24 28c	25 X 29	26 30
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	e and address of any politica	al comr	nittee t	solicit cor	tributi	ons fr	om sı			
<u> </u>	Full Name (Last, First, Middle Initial) FRIENDS OF LOWE FINNEY  Mailing Address 312 EAST LAFAYETTE	STREET			Date	of D	sburs			70293 Ž 0 Ŏ	9 <sup>Y</sup>
	City JACKSON	State Zip Code TN 38301			Amo	ount o	f Each	Disb	ursem	ent this	
	Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION		Ca	)11 tegory/ ype	]   _		•		•	300.0	O
	• 🗎 –	ement For: 2010 Primary General Other (specify)									
3.	Full Name (Last, First, Middle Initial)  NORTH CAROLINA HOUSE DEMOCRATIC CAUCUS  Mailing Address 220 HILLSBOROUGH STREET					of D	sburs			70310 Ž 0 Ŏ	9 <sup>Y</sup>
	City RALEIGH Purpose of Disbursement	State Zip Code NC 27603	-	)11	Amo	ount o	f Each	Disb		ent this 1000.0	
	Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President  State: NC District:	ement For:  Primary General  Other (specify)	1	tegory/ ype							
).	Full Name (Last, First, Middle Initial)  NORTH CAROLINA REPUBLICAN SENATE COMMITTEE  Mailing Address 1506 HILLSBOROUGH STREET					of D	sburs			70311 Ž 0 Ŏ	9 <sup>Y</sup>
	City RALEIGH	State Zip Code NC 27605			Amo	ount o			ursem	ent this	
	Purpose of Disbursement			)11	] L					500.0	0
	Candidate Name NON-FEDERAL CONTRIBUTION Office Sought: House Disburse	ement For:	Category/ Type								
	Senate President State: NC District:	Primary General Other (specify) ▼									
	<u> </u>										

CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	(check or	E NUMBER: PAGE 331 / 335
 EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 36
y Information copied from such Reports and State for commercial purposes, other than using the nan			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL			
Full Name (Last, First, Middle Initial) RAMPAC  Mailing Address 3311 HIGHWAY 126			Transaction ID: EXP.B.70291 Date of Disbursement  To Detail Details Detailed To Detail Detailed To Detailed To Detail Detailed To
City BLOUNTVILLE	State Zip Code TN 37617		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Office Sought: House Senate President State: TN District:	ement For:  Primary General  Other (specify) ▼		
Full Name (Last, First, Middle Initial) REPUBLICAN HOUSE MAJORITY FUND			Transaction ID: EXP.B.70309 Date of Disbursement
Mailing Address 1506 HILLSBOROUGH		10 7 23 7 2009	
City RALEIGH	State Zip Code NC 27605		Amount of Each Disbursement this Period
Purpose of Disbursement  Candidate Name		011 Category/	500.00
NON-FEDERAL CONTRIBUTION		Туре	
Office Sought:    House   Disburs     Senate   President     State: NC   District:	ement For:  Primary General  Other (specify) ▼		
Full Name (Last, First, Middle Initial) SENATOR CLARK JENKINS COMMITTE	E		Transaction ID: EXP.B.70306 Date of Disbursement
Mailing Address P.O. BOX 310			10 M / 23 / Y 2009
City TARBORO	State Zip Code NC 27886		Amount of Each Disbursement this Period
Purpose of Disbursement	011	500.00	
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Senate >	ement For: 2010  Primary General  Other (specify) ▼	•	
State: NC District:			

ITE				arate schedule(s)		NE NUMBER: PAGE 332 / 335 only one)
	MIZED DISBUR		Detailed	category of the Summary Page	21b	22 23 24 25 28a 28b 28c X 29
r for	r commercial purposes, c	other than using the nan	ne and addre	ss of any political	committee to	on for the purpose of soliciting contributions solicit contributions from such committee  a. Medco Health PAC)
F	Full Name (Last, First, Mid SENATOR DAVID HO	ddle Initial)				Transaction ID: EXP.B.70305 Date of Disbursement
N	Mailing Address 220	HILLSBOROUGH S	STREET			10 M / D 2 3 / Y Y Y O Y 9 Y
	City RALEIGH		State NC	Zip Code 27603		Amount of Each Disbursement this Perio
Ċ	Purpose of Disbursement  Candidate Name				011 Category/	1000.00
Ċ	Se	ouse Disbursenate Sesident	sement For:  C Primary  Other (spe	2010 General	Type	
	Full Name (Last, First, Middle Initial) SENATOR TONY RAND COMMITTEE				Transaction ID: EXP.B.70307 Date of Disbursement	
N	Mailing Address 2008 LITHO PLACE					10 10 23 7 2009
	City FAYETTEVILLE		State NC	Zip Code 28304		Amount of Each Disbursement this Perio
-						1000.00
Ċ	Purpose of Disbursement  Candidate Name				011 Category/	
	Candidate Name NON-FEDERAL CON Office Sought: Ho	TRIBUTION  buse Disburse enate Senate	sement For:  Other (spe	2010 General		
S	Candidate Name  NON-FEDERAL CON  Office Sought: Ho  Se	TRIBUTION  Duse Disburse Prinate Disburse Disbur	Primary	General	Category/	Transaction ID: EXP.B.70304 Date of Disbursement
S F S	Candidate Name NON-FEDERAL CON Office Sought: Ho Se Prostate: NC District Full Name (Last, First, Michael STAN BINGHAM FOR	TRIBUTION  Duse Disburse Prinate Disburse Disbur	Other (spe	General	Category/	Transaction ID: EXP.B.70304
S S S	Candidate Name NON-FEDERAL CON Office Sought: Ho Se Prostate: NC District Full Name (Last, First, Michael STAN BINGHAM FOR	TRIBUTION  Duse Penate esident ot:  ddle Initial) R SENATE	Other (spe	General	Category/	Transaction ID: EXP.B.70304 Date of Disbursement  M M M D D D Y Y Y Y O Y 9  Amount of Each Disbursement this Period
SS S S	Candidate Name NON-FEDERAL CON Office Sought:  Ho Se Pro State: NC District Full Name (Last, First, Mic STAN BINGHAM FOR Mailing Address DENTON Purpose of Disbursement Candidate Name	TRIBUTION  puse Disburs enate esident ot:  ddle Initial) R SENATE  NORTH MAIN STR	Other (spe	General ecify) ▼  Zip Code	Category/ Type  011 Category/	Transaction ID: EXP.B.70304 Date of Disbursement  10 M / D D D / Y Y Y O O 9
F S N C C C N C C N C C N C C N C C N C C N C C N C C N C C N C C N C C N C C N C C N C C N C C N C C N C N C C N	Candidate Name NON-FEDERAL CON Office Sought:  State: NC Full Name (Last, First, Michael STAN BINGHAM FORMailing Address DENTON Purpose of Disbursement Candidate Name NON-FEDERAL CON Office Sought:  Ho Se	TRIBUTION  Disburse esident ot:  ddle Initial) R SENATE  NORTH MAIN STR  TRIBUTION  Duse Disburse enate esident	Other (spe	General ecify) ▼  Zip Code 27239  2010  General	Category/ Type	Transaction ID: EXP.B.70304 Date of Disbursement  M M M D D D Y Y Y Y O Y 9  Amount of Each Disbursement this Period

A.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLITIONS INC. POLITIONS INC.	TICAL ACTION COMMITT	FF (aka N	Medon Health PAC)
/	HOVE ACTION COMMITT	LL (a.n.a. N	iodoo Hoalii i AO)
Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.70303
THE MARC BASNIGHT CAMPAIGN			Date of Disbursement
Mailing Address P.O. BOX 26202			10 M / D 3 / Y 2009 Y
•	State Zip Code NC 27611		Amount of Each Disbursement this Period
	110 27011		1000.00
Purpose of Disbursement	IΓ	011	1000.00
Candidate Name			
NON-FEDERAL CONTRIBUTION		Category/ Type	
Office Sought: House Disburse	ment For: 2010		
Senate X	Primary General		
President	Other (specify)		
State: TN District:			

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	<u> </u>	19500.00

**DEBTS AND OBLIGATIONS** 

(Use separate schedule(s)

PAGE 334 / 335 FOR LINE NUMBER:

	9
Χ	10

	cluding Loans		for each numbered line)	(check only one)	9 X 10
_	AME OF COMMITTEE (In Full)		<u> </u>		
	MEDCO HEALTH SOLUTIONS INC. POLITI	CAL ACTION COMMITTEE (a.k	.a. Medco Healt	h PAC)	
	A. Full Name (Last, First, Middle Initial) of Debto NIELSEN, MERKSAMER, PARRINELLO,		Nature of I LEGAL 8 ES	Debt (Purpose): & ACCOUNTING SE	RVIC-
	Mailing Address 1415 L STREET, STE. 12	00			
	City State SACRAMENTO CA	ZIP Code 95814			
	Outstanding Balance Beginning This Period		Tra	ansaction ID: PAY:D:	65909
	321.00				
	Amount Incurred This Period	Payment This Period	Outstand	ling Balance at Close of	This Period
	0.00	321.00			0.00
	B. Full Name (Last, First, Middle Initial) of Debto NIELSEN, MERKSAMER, PARRINELLO,		Nature of I LEGAL 8 ES	Debt (Purpose): & ACCOUNTING SE	RVIC-
	Mailing Address 1415 L STREET, STE. 12	00			
	City State SACRAMENTO CA	ZIP Code 95814			
	Outstanding Balance Beginning This Period		Tra	ansaction ID: PAY:D:	66969
	406.00				
	Amount Incurred This Period	Payment This Period	Outstand	ling Balance at Close of	This Period
	0.00	406.00			0.00
	C. Full Name (Last, First, Middle Initial) of Debto	or or Craditor	Nature of I	Debt (Purpose):	
	NIELSEN, MERKSAMER, PARRINELLO,		LEGAL 8	& ACCOUNTING SE	RVIC-
	Mailing Address 1415 L STREET, STE. 12	00			
	City State SACRAMENTO CA	ZIP Code 95814			
	Outstanding Balance Beginning This Period		Tra	ansaction ID: PAY:D:	69615
	610.00				
	Amount Incurred This Period	Payment This Period	Outstand	ling Balance at Close of	This Period
	0.00	0.00			610.00
1)	) SUBTOTALS This Period This Page (optional).		<b>•</b>	610.	00
2	) TOTALS This Period (last page this line number	only)	<b>&gt;</b>		
3	) TOTAL OUTSTANDING LOANS from Sched	lule C (last page only)	<b>&gt;</b>		
4	ADD 2) and 2) and corry farward to appropriate	line of Summary Page (last page only)			

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 335 / 335 (Use separate

9

FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each (check only one) numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): LEGAL & ACCOUNTING SERVIC-FS NIELSEN, MERKSAMER, PARRINELLO, MUELLER, & NAYLOR, LLP Mailing Address 1415 L STREET, STE. 1200 ZIP Code City State **SACRAMENTO** CA 95814 Outstanding Balance Beginning This Period Transaction ID: PAY:D:69608 394.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 394.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): LEGAL & ACCOUNTING SERVICES NIELSEN, MERKSAMER, PARRINELLO, MUELLER, & NAYLOR, LLP Mailing Address 1415 L STREET, STE. 1200 ZIP Code City State **SACRAMENTO** 95814 CA Outstanding Balance Beginning This Period Transaction ID: PAY:D:71621 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 706.10 0.00 706.10 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): LEGAL & ACCOUNTING SERVIC-NIELSEN, MERKSAMER, PARRINELLO, MUELLER, & NAYLOR, LLP Mailing Address 1415 L STREET, STE. 1200 ZIP Code State City SACRAMENTO 95814 CA Outstanding Balance Beginning This Period Transaction ID: PAY:D:71622 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 281.50 0.00 281.50 987.60 1) SUBTOTALS This Period This Page (optional)..... 1597.60 2) TOTALS This Period (last page this line number only)...... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

1597.60